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| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| WESTERN DISTRICT OF VIRGINIA                    | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ■ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |  |  |
|-----|---|--|--|
|     |   | About Debtor 1:                                  | About Debtor 2 (Spouse Only in a Joint Case):    |
| 1.  | Your full name  |  |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Ian First name  R. Middle name                   | Denise First name  F.  Middle name               |
|     | Bring your picture identification to your meeting with the trustee.   | Jackson Last name and Suffix (Sr., Jr., II, III) | Jackson Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years   |  |  |
|     | Include your married or maiden names.   |  |  |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)         | xxx-xx-2983                                      | xxx-xx-4196                                      |

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| De | btor 2 Denise F. Jacksor  | 1   | Case number (if known)   |
|----|---|---|--|
|    |   |   |  |
|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  | ■ I have not used any business name or EINs.   |
|    | Include trade names and doing business as names   | Business name(s)  | Business name(s)   |
|    |   | EINs  | EINs   |
| 5. | Where you live  | 2272 Oakridge Court   | If Debtor 2 lives at a different address:  |
|    |   | 2272 Oakridge Court Charlottesville, VA 22911 Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |   | Albemarle County  | County   |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |   | PO Box 5428<br>Charlottesville, VA 22905  |  |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for  | Check one:  | Check one:   |
|    | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I<br>have lived in this district longer than in any other<br>district.                 |
|    |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |   |   |  |

Debtor 1 lan R. Jackson

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# 11. Do you rent your residence?

■ No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

Case 17-60265 Doc 1 Filed 02/13/17 Entered 02/13/17 09:06:54 Desc Main Document Page 4 of 117 Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor Go to Part 4. of any full- or part-time No. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

|     | tor 1 Ian R. Jackson tor 2 Denise F. Jackson  | 1    |   |     | Case number (if known)   |
|-----|---|------|---|-----|--|
| art | 5: Explain Your Efforts t   | o Re | ceive a Briefing About Credit Counseling  |     |  |
|     |   | Abo  | out Debtor 1:   | Abo | out Debtor 2 (Spouse Only in a Joint Case):  |
| 5.  | Tell the court whether you have received a briefing about credit counseling.  | You  | I must check one:  I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.   | You | I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate o completion.  |
|     | The law requires that you receive a briefing about credit counseling before   |      | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |     | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.   |
|     | you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to |      | I received a briefing from an approved credit<br>counseling agency within the 180 days before I<br>filed this bankruptcy petition, but I do not have<br>a certificate of completion.  |     | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificat of completion.   |
|     | file.  If you file anyway, the court can dismiss your case, you   |      | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |     | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.  |
|     | will lose whatever filing fee<br>you paid, and your<br>creditors can begin<br>collection activities again.                    |      | I certify that I asked for credit counseling<br>services from an approved agency, but was<br>unable to obtain those services during the 7<br>days after I made my request, and exigent<br>circumstances merit a 30-day temporary waiver                         |     | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  |
|     |   |      | of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances |     | To ask for a 30-day temporary waiver of the requirement attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied |
|     |   |      | required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a  |     | with your reasons for not receiving a briefing before you filed for bankruptcy.  |
|     |   |      | briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you         |     | If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  |
|     |   |      | developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted  |     | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.   |
|     |   |      | only for cause and is limited to a maximum of 15  |     |  |
|     |   |      | days. I am not required to receive a briefing about credit counseling because of:   |     | I am not required to receive a briefing about credit counseling because of:  |
|     |   |      | ☐ Incapacity.  I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |     | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |
|     |   |      | Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.   |     | Disability.  My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  |
|     |   |      | Active duty. I am currently on active military duty in a military combat zone.  |     | Active duty. I am currently on active military duty in a military combat zone.   |

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-60265 Doc 1 Filed 02/13/17 Entered 02/13/17 09:06:54 Desc Main Document Page 6 of 117 Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **50-99 5001-10,000 5**0,001-100,000 owe? **1**0,001-25,000 ☐ More than 100,000 100-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion ■ \$1.000.001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be worth? □ \$100,001 - \$500,000 □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million □ \$500,001 - \$1 million ☐ More than \$50 billion □ \$100.000.001 - \$500 million 20. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion ■ \$1.000.001 - \$10 million estimate your liabilities □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million to be? **□** \$100,001 - \$500,000 □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million □ \$500,001 - \$1 million ■ More than \$50 billion □ \$100,000,001 - \$500 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ lan R. Jackson /s/ Denise F. Jackson Denise F. Jackson lan R. Jackson Signature of Debtor 1 Signature of Debtor 2

Executed on February 13, 2017

MM / DD / YYYY

Executed on February 13, 2017

MM / DD / YYYY

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackso                                  | n   | Cas   | se number (if known)   |
|--|---|---|--|
|  |   |   |  |
| For your attorney, if you are represented by one                                   | under Chapter 7, 11, 12, or 13 of title 11, Un for which the person is eligible. I also certify | nited States Code, and have e<br>y that I have delivered to the | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b |
| f you are not represented by<br>an attorney, you do not need<br>to file this page. | and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.   |   | vledge after an inquiry that the information in the  |
| . •  | /s/ Marshall M. Slayton   | Date  | February 13, 2017  |
|  | Signature of Attorney for Debtor  |   | MM / DD / YYYY   |
|  | Marshall M. Slayton   |   |  |
|  | Printed name  |   |  |
|  | Slayton Law, PLC  |   |  |
|  | Firm name   |   |  |
|  | 913 East Jefferson Street   |   |  |
|  | Charlottesville, VA 22902   |   |  |
|  | Number, Street, City, State & ZIP Code  |   |  |
|  | Contact phone (434) 979-7900  | Email address   | marshall@marshallslayton.com   |
|  | VSB#37362   |   |  |
|  | Bar number & State  |   |  |

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| Fill in this info   | rmation to identify your | case:              |             |                                      |
|---------------------|--------------------------|--------------------|-------------|--------------------------------------|
| Debtor 1            | lan R. Jackson           |                    |             |                                      |
|                     | First Name               | Middle Name        | Last Name   |                                      |
| Debtor 2            | Denise F. Jackso         | n                  |             |                                      |
| (Spouse if, filing) | First Name               | Middle Name        | Last Name   |                                      |
| United States B     | ankruptcy Court for the: | WESTERN DISTRICT O | OF VIRGINIA |                                      |
| Case number         |                          |                    |             | Charle if this is an                 |
| (ii Kilowii)        |                          |                    |             | ☐ Check if this is an amended filing |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|    |   |            | assets<br>of what you own  |
|----|---|------------|----------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$         | 986,600.00                 |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$         | 2,298,929.87               |
|    | 1c. Copy line 63, Total of all property on Schedule A/B   | \$         | 3,285,529.87               |
| Pa | rt 2: Summarize Your Liabilities  |            |                            |
|    |   |            | liabilities<br>int you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                   | \$         | 3,213,865.81               |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$         | 54,467.85                  |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$         | 1,794,632.23               |
|    | Your total liabilities  | \$         | 5,062,965.89               |
| Pa | rt 3: Summarize Your Income and Expenses  |            |                            |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$         | 2,521.46                   |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$         | 3,570.3                    |
| Pa | Answer These Questions for Administrative and Statistical Records   |            |                            |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your                                     | ır other s | chedules.                  |
|    | ■ Yes What kind of debt do you have?  |            |                            |
| 7. | What kind of debt do you have:  |            |                            |
| 7. | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a persona  | al, family, or             |

the court with your other schedules.

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| Deb | tor 2 | Denise F. Jackson  | Case number (if known)   |    |
|-----|-------|--|--|----|
| 8.  |       | the Statement of Your Current Monthly Income: Co<br>-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 | py your total current monthly income from Official Form Line 14. | \$ |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 lan R. Jackson

|  | Tot | al claim  |
|--|-----|-----------|
| From Part 4 on Schedule E/F, copy the following:   |     |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$  | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$  | 54,467.85 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$  | 31,928.32 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$  | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$  | 86,396.17 |

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|              |   |                                   |   |                        |  |                 | •                               |         |  |
|--------------|---|-----------------------------------|---|------------------------|--|-----------------|---------------------------------|---------|--|
| Fill         | in this informa   | tion to identify                  | your case and th                            | is filinç              | <b>j</b> :   |                 |                                 |         |  |
| Deb          | otor 1  | lan R. Jacks                      | on  |                        |  |                 |                                 |         |  |
|              | •   | First Name                        |   | Name                   | Last Name  |                 |                                 |         |  |
|              | otor 2<br>use, if filing)                                     | Denise F. Ja<br>First Name        |   | Name                   | Last Name  |                 |                                 |         |  |
| Uni          | ted States Bank   | ruptcy Court for                  | the: WESTERN                                | DISTR                  | ICT OF VIRGINIA  |                 |                                 |         |  |
| Cas          | se number   |                                   |   |                        |  |                 |                                 |         | Check if this is an amended filing     |
| Sc           | ficial Form   | A/B: Pi                           | roperty                                     | an assot               | only once. If an asset fits in more than o   | ne category li  | st the asset in                 | the cat | 12/15                                  |
| hink<br>nfor | tit fits best. Be a<br>mation. If more s<br>ver every questio | s complete and pace is needed, n. | accurate as possibl<br>attach a separate sl | e. If two<br>neet to t | married people are filing together, both a his form. On the top of any additional pag  Estate You Own or Have an Interest In | re equally resp | onsible for su                  | pplying | g correct                              |
| . D          |   |                                   |   |                        | ence, building, land, or similar property?   |                 |                                 |         |  |
| _            | No. Go to Part 2.   |                                   |   | ,                      | 3, 4 4, 4 4 4  |                 |                                 |         |  |
|              | _   |                                   |   |                        |  |                 |                                 |         |  |
|              | Yes. Where is th  | e property?                       |   |                        |  |                 |                                 |         |  |
|              |   |                                   |   |                        |  |                 |                                 |         |  |
| 1.1          | 101 West Pa   | rk Drivo                          |   | _                      | is the property? Check all that apply  |                 |                                 |         |  |
|              |   | vailable, or other des            | scription                                   |                        | Single-family home   |                 |                                 |         | exemptions. Put s on Schedule D:       |
|              |   |                                   | ·   |                        | Duplex or multi-unit building  Condominium or cooperative  |                 |                                 |         | ured by Property.                      |
|              | Charlottesvi  | lle VA                            | 22901-0000                                  |                        | Manufactured or mobile home Land   | Current va      |                                 |         | ent value of the on you own?           |
|              | City  | State                             | ZIP Code                                    |                        | Investment property  | \$3             | 80,000.00                       |         | \$380,000.00                           |
|              |   |                                   |   |                        | Timeshare Other  | _ (such as f    | ee simple, ten                  |         | nership interest<br>the entireties, or |
|              |   |                                   |   |                        | has an interest in the property? Check one   | Fee sim         | te), if known.                  |         |  |
|              | Albemarle   |                                   |   |                        | ,  | 1 00 3111       | hie                             |         |  |
|              | County  |                                   |   | _                      | Debtor 2 only  Debtor 1 and Debtor 2 only  |                 |                                 |         |  |
|              | ,   |                                   |   |                        | •  |                 | k if this is com<br>structions) | munity  | property                               |
|              |   |                                   |   | Othe                   | r information you wish to add about this it<br>erty identification number:   | `               | *                               |         |  |
|              |   |                                   |   | Ren<br>thre            | tal: Four apartments. Debtors p<br>e. TAV = \$507,400<br>tors' value = \$380,000   | lan to live i   | n one and r                     | ent th  | ne other                               |

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| Debtor 2<br>Debtor 2 |                           |                | l                |     | Case   | e number (if known)   |  |
|----------------------|---------------------------|----------------|------------------|-----|--|---|--|
| lf y                 | you own or ha             | ve more        | than one, list h |     | is the property? Check all that apply  |   |  |
| 22                   | 20 Anchor Cove            | 9              |                  | _   | Single-family home   | Do not deduct secured cla   | sime or exemptions. Put                              |
| Stre                 | eet address, if available | , or other des | scription        | _   | Duplex or multi-unit building  | the amount of any secure  |  |
|                      |                           |                |                  |     | Condominium or cooperative   | Creditors Who Have Clair  | ns Secured by Property.                              |
| Br                   | racey                     | VA             | 23919-0000       |     | Manufactured or mobile home  | Current value of the  | Current value of the                                 |
|                      | <u> </u>                  |                |                  |     |  | entire property?<br>\$156,100.00  | portion you own?<br>\$156,100.00                     |
| City                 | у                         | State          | ZIP Code         |     | Investment property  | φ130,100.00   | φ130,100.00  |
|                      |                           |                |                  |     | Timeshare Other  |   | our ownership interest<br>ancy by the entireties, or |
|                      |                           |                |                  |     | has an interest in the property? Check one   | a life estate), if known.   | !mat   |
|                      |                           |                |                  |     | Debtor 1 only  | Tenants by the ent  | irety  |
|                      | ecklenburg                |                |                  |     | Debtor 2 only  |   |  |
| Соц                  | unty                      |                |                  | _   | Debtor 1 and Debtor 2 only   | ☐ Check if this is com  | munity property                                      |
|                      |                           |                |                  |     | At least one of the debtors and another  | (see instructions)  |  |
|                      |                           |                |                  |     | r information you wish to add about this iter<br>erty identification number:   | m, such as local  |  |
|                      |                           |                |                  |     | tal: Single story ranch<br>= \$ 156,100  |   |  |
| 1.3<br>              | you own or ha             | ve             | than one, list h |     | is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative  | Do not deduct secured class the amount of any secure Creditors Who Have Claim | d claims on Schedule D:                              |
| Br                   | racey                     | VA             | 23919-0000       |     | Manufactured or mobile home Land   | Current value of the entire property?   | Current value of the portion you own?                |
| City                 | У                         | State          | ZIP Code         |     | Investment property  | \$220,000.00  | \$220,000.00   |
|                      |                           |                |                  |     | Timeshare  | Describe the nature of  |  |
|                      |                           |                |                  |     | Other  | Describe the nature of y<br>(such as fee simple, ten                          | ancy by the entireties, or                           |
|                      |                           |                |                  | Who | has an interest in the property? Check one   | a life estate), if known.   | _  |
|                      |                           |                |                  |     | Debtor 1 only  | Tenants by the ent  | irety  |
| Me                   | ecklenburg                |                |                  |     | Debtor 2 only  |   |  |
| Cou                  | unty                      |                |                  |     | Debtor 1 and Debtor 2 only   | ☐ Check if this is com  | munity property                                      |
|                      |                           |                |                  |     | At least one of the debtors and another  | (see instructions)  | 71 17 7  |
|                      |                           |                |                  |     | r information you wish to add about this iter<br>erty identification number:   | m, such as local  |  |
|                      |                           |                |                  | TAV | tal: House zoned residential with of the state of the sta | commercial continge   | ncy  |

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| if you own or n   | ave more                 | than one, list h     | ere:                               |   |   |  |
|---|--------------------------|----------------------|------------------------------------|---|---|--|
|   |                          | ,                    |                                    | is the property? Check all that apply   |   |  |
| 187 Windsor PI  |                          |                      |                                    | Single-family home  | Do not deduct secured cl  |  |
| Street address, if availab  | le, or other des         | scription            |                                    | Duplex or multi-unit building   | the amount of any secure<br>Creditors Who Have Clair  |  |
|   |                          |                      |                                    | Condominium or cooperative  |   | , , ,  |
|   |                          |                      | П                                  | Manufactured or mobile home   |   |  |
| Buckingham  | VA                       | 23921-0000           | _                                  | Land  | Current value of the<br>entire property?  | Current value of the portion you own?  |
| City  | State                    | ZIP Code             | _                                  | Investment property   | \$115,500.00  | \$115,500.0  |
| ,   |                          |                      |                                    | Timeshare   | Describe the nature of  |  |
|   |                          |                      |                                    | Other   | Describe the nature of y<br>(such as fee simple, ten  | •  |
|   |                          |                      | _                                  | has an interest in the property? Check one  | a life estate), if known.   |  |
| 5 11 1  |                          |                      |                                    | Debtor 1 only   | Tenants by the ent  | tirety   |
| Buckingham  |                          |                      |                                    | Debtor 2 only   |   |  |
| County  |                          |                      |                                    | Debtor 1 and Debtor 2 only  | ☐ Check if this is con  | nmunity property   |
|   |                          |                      |                                    | The roads of the debtors and arrother   | (see instructions)  |  |
|   |                          |                      |                                    | r information you wish to add about this ite<br>erty identification number:   | m, such as local  |  |
|   |                          |                      |                                    | •   |   |  |
| If you own or h   |                          | than one, list h     | ere:<br>What                       | ch house - rental property  is the property? Check all that apply   |   |  |
| 115 Windsor Pl  | ace                      |                      | ere:                               | is the property? Check all that apply Single-family home  | Do not deduct secured cl  |  |
| ,   | ace                      |                      | ere:<br>What                       | is the property? Check all that apply Single-family home Duplex or multi-unit building  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clair  | ed claims on <i>Schedule D</i> :   |
| 115 Windsor Pl  | ace                      |                      | ere:<br>What                       | is the property? Check all that apply Single-family home  | the amount of any secure  | ed claims on <i>Schedule D.</i>  |
| 115 Windsor Pl  | ace                      |                      | ere:<br>What                       | is the property? Check all that apply Single-family home Duplex or multi-unit building  | the amount of any secure<br>Creditors Who Have Clair  | ed claims on <i>Schedule D.</i><br>ms Secured by Property.                                       |
| 115 Windsor Pl  | ace                      |                      | ere:<br>What                       | is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative   | the amount of any secure  | ed claims on <i>Schedule D.</i>  |
| 115 Windsor Pl Street address, if availat                               | ace<br>ble, or other des | scription            | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property  | the amount of any secure Creditors Who Have Clair  Current value of the   | ed claims on Schedule Dams Secured by Property.  Current value of the                            |
| 115 Windsor PI Street address, if availat Buckingham                    | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare  | Current value of the entire property?  \$115,000.00  Describe the nature of y   | current value of the portion you own?  \$\frac{115,000}{0}\$  Current own?                       |
| 115 Windsor PI Street address, if availat Buckingham                    | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other  | Current value of the entire property?  \$\frac{115,000.00}{2}\$   | current value of the portion you own?  \$\frac{115,000}{0}\$  Current own?                       |
| 115 Windsor PI Street address, if availat Buckingham                    | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare  | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten  | Current value of the portion you own? \$115,000. Your ownership interestancy by the entireties,  |
| 115 Windsor Pl Street address, if availat Buckingham                    | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one  | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  | Current value of the portion you own? \$115,000. Your ownership interestancy by the entireties,  |
| 115 Windsor Pl Street address, if availat  Buckingham  City             | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only   | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Tenants by the entire Creditors Who Have Claim Care Claim Care Care Care Care Care Care Care Care   | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |
| 115 Windsor PI Street address, if availat  Buckingham  City  Buckingham | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |
| 115 Windsor Pl Street address, if availat  Buckingham  City  Buckingham | ace<br>ble, or other des | scription 23921-0000 | ere:<br>What                       | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Tenants by the entire of the entire estate of the estate of the estate of the estate of the entire estate of the estate of th | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |
| 115 Windsor PI Street address, if availat  Buckingham  City  Buckingham | ace<br>ble, or other des | scription 23921-0000 | ere: What  What  Who  Other proper | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this itelepty identification number: | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Tenants by the entire of the entire estate of the estate of the estate of the estate of the entire estate of the estate of th | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |
| 115 Windsor PI Street address, if availat  Buckingham  City  Buckingham | ace<br>ble, or other des | scription 23921-0000 | ere: What  What  Who  Other proper | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iter                           | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Tenants by the entire of the entire estate of the estate of the estate of the estate of the entire estate of the estate of th | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |
| 115 Windsor Pl Street address, if availat  Buckingham  City  Buckingham | ace<br>ble, or other des | scription 23921-0000 | ere: What  What  Who  Other proper | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this itelepty identification number: | Current value of the entire property?  \$115,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Tenants by the entire of the entire estate of the estate of the estate of the estate of the entire estate of the estate of th | Current value of the portion you own? \$115,000.  Your ownership interestancy by the entireties, |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Page 13 of 117 Document Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Chevrolet 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Volt Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 103258 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another TAV=13,250.00 \$3,654.00 \$3,654.00 ☐ Check if this is community property Debtor value=\$3654.00 Location: 2272 Oakridge Court, (see instructions) Charlottesville VA 22911 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3,654.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Large appliances, small appliances, kitchen furniture, kitchenware, dining room furniture, living room furniture, family room furniture, bedroom furniture, miscellaneous household goods and \$4,422.00 furnishings, linens, home office furniture. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe..... \$765.00 Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 4

Collectibles: african art, coke sign, old telephones and curios

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Desc Main

\$350.00

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Official Form 106A/B

Page 15 of 117 Document Ian R. Jackson Debtor 1 Case number (if known) Debtor 2 Denise F. Jackson Cash: Location: SunTrust Safe \$18,000.00 **Deposit Box** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Suntrust Bank** \$2,288.00 17.1. Checking 17.2. Checking **US Bank** \$25.00 SunTrust Bank account in name of Tudor Place, LLC. Balance is property of Debtors' son, Jake Jackson, and is from proceeds from sale of land iowned by son that was \$12,500.00 17.3. Checking located in Tudor Place Subdivision. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership:

Official Form 106A/B

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| Debtor 1<br>Debtor 2    | lan R. Jackson<br>Denise F. Jacks                  | on  | Case number        | (if known)      |                |
|-------------------------|--|---|--------------------|-----------------|----------------|
|                         |  | I & J Home Builders LLC Assets: 1. 661 Cedar Meadows Drive, Nellysford, VA 22958 (TAV=\$327,600) 2. 123 Walk Around Lane, Roseland, VA 22967 (TAV=459,300) 3. 2005 Nissan Armada with 145,616 miles (Debtor value = \$3,600) 4. Note owed by Michael A. Fox, Jr. (Balance=  |                    |                 |                |
|                         |  | \$5400)  5. 3% Commission owed by Sipe's Construction on 11 construction contracts assiged to Sipe's Construction in return for the commission (estimated value is \$68,246.00)  6. 171 Windsor Place, Buckingham, VA 23901 (Sale price = \$ 114,000. Closing set for March 2, 2017)  |                    |                 |                |
|                         |  | 7. Lot 197 Shenandoah Crossing, Louisa, VA - \$15,000 8. Lot 198 Shenandoah Crossing, Louisa, VA - \$15,000 9. Bald Eagle Cove, Bracey, VA 23919 - \$330,000 10. Lot 67-2-E Tree Notch Road, Louisa, VA - \$200,000 11. Lots 1 and 11, Tudor Place, Buckingham, VA \$ 38,649 12. Refund owed by Union Bank for engineering work done on Village Green Subdivision - |                    |                 |                |
|                         |  | \$33,421  | 100                | %               | \$1,610,216.00 |
|                         |  | I & J Property Holdings Inc.<br>Location: 2272 Oakridge Court, Charlottesville<br>VA 22911  | 100                | %               | \$1.00         |
|                         |  | Front Gate Holdings, Inc.<br>Location: 2272 Oakridge Court, Charlottesville<br>VA 22911   | 100                | %               | \$1.00         |
|                         |  | Route 15, LLC. Assets = Office building and two sheds located at 21708 James Madison Hwy, Troy, VA 22974. Debtor value=\$550,000.00   | 100                | <u></u> %       | \$550,000.00   |
| Negot<br>Non-ri<br>■ No | tiable instruments inclu<br>negotiable instruments | e bonds and other negotiable and non-negotiable instrume<br>ude personal checks, cashiers' checks, promissory notes, and<br>are those you cannot transfer to someone by signing or delive   | money orders.      |                 |                |
| ⊔ Yes.                  | Give specific informa                              | tion about them Issuer name:  |                    |                 |                |
| Exam<br>□ No<br>□       | •  | ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other   | r pension or profi | it-sharing plan | s              |
| ■ Yes.                  | List each account sep<br>T                         | parately. ype of account: Institution name:   |                    |                 |                |
|                         |  | Retirement: LPL Financia  | I SEP IRA          |                 | \$10,318.14    |

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| Debtor 1<br>Debtor 2 | lan R. Jackson<br>Denise F. Jackson   |   | Case number (if known)          |  |  |  |  |
|----------------------|---|---|---------------------------------|--|--|--|--|
|                      |   | Retirement: LPL Financial S   | EP IRA                          | \$10,694.73  |  |  |  |
| Your                 |   | have made so that you may continue service or use fro prepaid rent, public utilities (electric, gas, water), teleco |                                 | others   |  |  |  |
| ■ No<br>□ Yes        | S   | Institution name or individual:   |                                 |  |  |  |  |
| _                    | ities (A contract for a periodic page   | yment of money to you, either for life or for a number of   | years)                          |  |  |  |  |
| ■ No<br>□ Yes        | s Issuer name and   | description.  |                                 |  |  |  |  |
| 26 U.S               | sts in an education IRA, in an a<br>S.C. §§ 530(b)(1), 529A(b), and 52  | ccount in a qualified ABLE program, or under a qua 29(b)(1).  | lified state tuition program.   |  |  |  |  |
| ■ No<br>□ Yes        | Institution name a  | and description. Separately file the records of any interest  | ests.11 U.S.C. § 521(c):        |  |  |  |  |
| ■ No                 | ss, equitable or future interests is.   | in property (other than anything listed in line 1), and them  | l rights or powers exercisabl   | e for your benefit   |  |  |  |
|                      |   | de secrets, and other intellectual property<br>bsites, proceeds from royalties and licensing agreemer               | nts                             |  |  |  |  |
|                      | s. Give specific information about  | them  |                                 |  |  |  |  |
| Exan<br>■ No         | nses, franchises, and other general properties. Building permits, exclusive s. Give specific information about                        | licenses, cooperative association holdings, liquor licens   | ses, professional licenses      |  |  |  |  |
|                      |   | mem   | •                               | rimmont value of the   |  |  |  |
| Money o              | r property owed to you?   |   | <b>po</b><br>Do                 | urrent value of the ortion you own? o not deduct secured aims or exemptions. |  |  |  |
| 28. <b>Tax r</b> o   | efunds owed to you  |   |                                 |  |  |  |  |
| ■ Yes                | s. Give specific information about  | them, including whether you already filed the returns ar  | d the tax years                 |  |  |  |  |
|                      |   |   | 1                               |  |  |  |  |
|                      |   | 2016 income tax refunds   | Federal                         | \$1.00   |  |  |  |
|                      |   | 2016 income tax refunds   | Va. State                       | \$1.00   |  |  |  |
| Exan<br>■ No         | ly support  nples: Past due or lump sum alime s. Give specific information  | ony, spousal support, child support, maintenance, divor   | ce settlement, property settlem | nent   |  |  |  |
| Exan                 | r amounts someone owes you<br>imples: Unpaid wages, disability institution benefits; unpaid loans you<br>s. Give specific information | surance payments, disability benefits, sick pay, vacation made to someone else                                      | n pay, workers' compensation,   | Social Security  |  |  |  |

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|--------------------------|---|-------------------------------------|---|--|----------------------------------|----------------------------|
| Debtor 1<br>Debtor 2     | lan R. Jackson<br>Denise F. Jackso  | on                                  |   |  | Case number (if known)           |                            |
|                          |   | 865, Ke<br>Home<br>closing          | eswidk, VA owned k<br>Builders, LLC built a<br>g they fell short on the<br>es, so Denise Jackso           | by Michael a<br>a house for t<br>he mortgage | loan due to market               | \$75,000.00                |
|                          | sts in insurance policiples: Health, disability,                                    |                                     | nealth savings account (I   | HSA); credit, h                              | omeowner's, or renter's insura   | ance                       |
| Yes.                     | . Name the insurance o  | company of each po<br>Company name: | olicy and list its value.   | В  | eneficiary:                      | Surrender or refund value: |
|                          |   | Insurance: ING<br>Term Insurance    | Reliastar Life Ins Co<br>e Policy   | o<br>  |                                  | \$1.00                     |
|                          |   | Insurance: F & Life                 | G Life Insurance Te   | erm  |                                  | \$1.00                     |
|                          |   | Insurance: F & Life                 | G Life Insurance Te   | erm<br>                                      |                                  | \$1.00                     |
| If you somed ■ No □ Yes. | are the beneficiary of one has died.  Give specific informa s against third parties | a living trust, expectation         | someone who has die<br>t proceeds from a life ins<br>you have filed a lawsui<br>surance claims, or rights | surance policy                               | or are currently entitled to rec | ceive property because     |
| ■ No                     | . Describe each claim.  |                                     |   |  |                                  |                            |
| ■ No                     |   |                                     | every nature, including   | g counterclair                               | ns of the debtor and rights t    | o set off claims           |
|                          | . Describe each claim. nancial assets you di  |                                     |   |  |                                  |                            |
| ■ No<br>□ Yes.           | . Give specific informa   | ation                               |   |  |                                  |                            |
|                          |   | •                                   | om Part 4, including ar   | -  | pages you have attached          | \$2,289,048.87             |
| Part 5: De               | escribe Any Business-R  | elated Property You                 | Own or Have an Interest I   | In. List any real                            | estate in Part 1.                |                            |
| No. G                    | own or have any legal of o to Part 6. Go to line 38.                                | or equitable interest i             | in any business-related pr  | roperty?                                     |                                  |                            |
|                          | escribe Any Farm- and C<br>you own or have an intere                                |                                     | Related Property You Owr  | n or Have an Int                             | erest In.                        |                            |
|                          | u own or have any le  | gal or equitable in                 | terest in any farm- or c  | commercial fis                               | hing-related property?           |                            |

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| Debtor 1          | lan R. Jackson  |                      |                              |                |
|-------------------|---|----------------------|------------------------------|----------------|
| Debtor 2          | Denise F. Jackson   |                      | Case number (if known)       |                |
| ☐ Yes             | . Go to line 47.  |                      |                              |                |
|                   |   |                      |                              |                |
| Part 7:           | Describe All Property You Own or Have an Interest in That Yo  | u Did Not List Above |                              |                |
|                   | ı have other property of any kind you did not already list    | ?                    |                              |                |
|                   | oles: Season tickets, country club membership                 |                      |                              |                |
| ■ No              |   |                      |                              |                |
| ☐ Yes.            | Give specific information                                     |                      |                              |                |
|                   |   |                      |                              | <b>.</b>       |
| 54. <b>Add t</b>  | the dollar value of all of your entries from Part 7. Write th | at number here       | ······   —                   | \$0.00         |
|                   |   |                      |                              |                |
| Part 8:           | List the Totals of Each Part of this Form                     |                      |                              |                |
| 55. <b>Part</b> 1 | 1: Total real estate, line 2                                  |                      |                              | \$986,600.00   |
| 56. <b>Part 2</b> | 2: Total vehicles, line 5                                     | \$3,654.00           | <del>-</del>                 |                |
| 57. <b>Part 3</b> | 3: Total personal and household items, line 15                | \$6,227.00           |                              |                |
| 58. <b>Part 4</b> | 4: Total financial assets, line 36                            | \$2,289,048.87       |                              |                |
| 59. <b>Part </b>  | 5: Total business-related property, line 45                   | \$0.00               |                              |                |
| 60. <b>Part 6</b> | 6: Total farm- and fishing-related property, line 52          | \$0.00               |                              |                |
| 61. <b>Part</b> 7 | 7: Total other property not listed, line 54 +                 | \$0.00               |                              |                |
| 62. <b>Total</b>  | personal property. Add lines 56 through 61                    | \$2,298,929.87       | Copy personal property total | \$2,298,929.87 |
| 63. <b>Total</b>  | of all property on Schedule A/B. Add line 55 + line 62        |                      |                              | \$3,285,529.87 |

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| ation to identify your | case:  |   |   |
|------------------------|--|---|---|
| lan R. Jackson         | Middle Name  | Last Name   |   |
|                        |  | Last Name   |   |
| First Name             | Middle Name  | Last Name   |   |
| cruptcy Court for the: | WESTERN DISTRICT C                                     | OF VIRGINIA   |   |
|                        |  |   | Charle if this is   |
|                        |  |   | ☐ Check if this is amended filing   |
|                        | Ian R. Jackson First Name Denise F. Jackson First Name | Ian R. Jackson First Name Middle Name  Denise F. Jackson First Name Middle Name | Ian R. Jackson First Name Middle Name Last Name  Denise F. Jackson First Name Middle Name Last Name |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1.                       | Which set of exemptions are you claiming  | ? Check one only, eve               | n if yo | our spouse is filing with you.                                  |  |  |
|--------------------------|---|-------------------------------------|---------|---|--|--|
|                          | ■ You are claiming state and federal nonbar   | kruptcy exemptions.                 | 11 U.S  | S.C. § 522(b)(3)  |  |  |
|                          | ☐ You are claiming federal exemptions. 11   | U.S.C. § 522(b)(2)                  |         |   |  |  |
| 2.                       | For any property you list on Schedule A/B   | that you claim as exe               | empt,   | fill in the information below.                                  |  |  |
|                          | Brief description of the property and line on Schedule A/B that lists this property                                       |                                     |         | ount of the exemption you claim                                 | Specific laws that allow exemption                         |  |
|                          |   | Copy the value from<br>Schedule A/B | Che     | eck only one box for each exemption.                            |  |  |
|                          | 101 West Park Drive Charlottesville,<br>VA 22901 Albemarle County   | \$380,000.00                        |         | \$1.00  | Va. Code Ann. § 34-4                                       |  |
| Rental: Four apartments. | Rental: Four apartments. Debtors plan to live in one and rent the other three. TAV = \$507,400 Debtors' value = \$380,000 |                                     |         | 100% of fair market value, up to any applicable statutory limit |  |  |
|                          | 101 West Park Drive Charlottesville,  | \$380,000.00                        |         | \$1.00  | 11 USC 522(b)(3)(B); Vasilion<br>v. Vasilion, 192 Va. 735; |  |
|                          | Rental: Four apartments. Debtors plan to live in one and rent the other three. TAV = \$507,400 Debtors' value = \$380,000 |                                     |         | 100% of fair market value, up to any applicable statutory limit | William v Peyton 104 F.3d 688                              |  |
|                          | 220 Anchor Cove Bracey, VA 23919<br>Mecklenburg County  | \$156,100.00                        |         | \$1.00  | Va. Code Ann. § 34-4                                       |  |
|                          | Rental: Single story ranch TAV = \$ 156,100   |                                     |         | 100% of fair market value, up to any applicable statutory limit |  |  |
|                          | Line from Schedule A/B: 1.2   |                                     |         |   |  |  |

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lan R. Jackson Debtor 1 Denise F. Jackson Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 19 Starboard Drive Bracey, VA 23919 Va. Code Ann. § 34-4 \$220,000.00 \$1.00 **Mecklenburg County** П Rental: House zoned residential with 100% of fair market value, up to commercial contingency any applicable statutory limit TAV = \$198,500**Debtors' value = \$220,000** Line from Schedule A/B: 1.3 187 Windsor Place Buckingham, VA Va. Code Ann. § 34-4 \$115,500.00 \$1.00 23921 Buckingham County Ranch house - rental property 100% of fair market value, up to Line from Schedule A/B: 1.4 any applicable statutory limit 2013 Chevrolet Volt 103258 miles Va. Code Ann. § 34-26(8) \$3,654.00 \$1.00 TAV=13,250.00 Debtor value=\$3654.00 100% of fair market value, up to Location: 2272 Oakridge Court, any applicable statutory limit Charlottesville VA 22911 Line from Schedule A/B: 3.1 Large appliances, small appliances, Va. Code Ann. § 34-26(4a) \$4,422.00 \$4,422.00 kitchen furniture, kitchenware, dining room furniture, living room furniture, 100% of fair market value, up to family room furniture, bedroom any applicable statutory limit furniture, miscellaneous household goods and furnishings, linens, home office furniture. Line from Schedule A/B: 6.1 **Electronics** Va. Code Ann. § 34-26(4a) \$765.00 \$765.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Collectibles: african art, coke sign, Va. Code Ann. § 34-4 \$350.00 \$350.00 old telephones and curios Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Board games. Va. Code Ann. § 34-4 \$50.00 \$50.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Womens clothing Va. Code Ann. § 34-26(4) \$110.00 \$110.00 Location: 2272 Oakridge Court, Charlottesville VA 22911 100% of fair market value, up to Line from Schedule A/B: 11.1 any applicable statutory limit Men's clothing Va. Code Ann. § 34-26(4) \$120.00 \$120.00 Location: 2272 Oakridge Court, Charlottesville VA 22911 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 11.2 Jewelry: Jewelry Va. Code Ann. § 34-4 \$260.00 \$260.00 Location: 2272 Oakridge Court, Charlottesville VA 22911 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit

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lan R. Jackson Debtor 1 Denise F. Jackson Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Jewelry: Wedding and engagement Va. Code Ann. § 34-26(1a) \$150.00 \$150.00 Location: 2272 Oakridge Court, 100% of fair market value, up to Charlottesville VA 22911 any applicable statutory limit Line from Schedule A/B: 12.2 Cash: Va. Code Ann. § 34-4 \$18,000.00 \$18,000.00 **Location: SunTrust Safe Deposit Box** Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Suntrust Bank** Va. Code Ann. § 34-4 \$2,288.00 \$1,999.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: US Bank Va. Code Ann. § 34-4 \$25.00 \$25.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking: SunTrust Bank account in Va. Code Ann. § 34-4 \$1.00 \$12,500.00 name of Tudor Place, LLC. Balance is property of Debtors' son, Jake 100% of fair market value, up to Jackson, and is from proceeds from any applicable statutory limit sale of land iowned by son that was located in Tudor Place Subdivision. Line from Schedule A/B: 17.3 I & J Home Builders LLC Va. Code Ann. § 34-4 \$1.610.216.00 \$1.00 Assets: 1. 661 Cedar Meadows Drive, 100% of fair market value, up to Nellysford, VA 22958 any applicable statutory limit (TAV = \$327,600)2. 123 Walk Around Lane, Roseland, VA 22967 (TAV=459,300) 3. 2005 Nissan Armada with 145,616 miles (Debtor value = \$3,600) 4. Note owed by Michael A. Line from Schedule A/B: 19.1 I & J Property Holdings Inc. Va. Code Ann. § 34-4 \$1.00 \$1.00 Location: 2272 Oakridge Court, Charlottesville VA 22911 100% of fair market value, up to 100 % ownership any applicable statutory limit Line from Schedule A/B: 19.2 Front Gate Holdings, Inc. Va. Code Ann. § 34-4 \$1.00 \$1.00 Location: 2272 Oakridge Court, Charlottesville VA 22911 100% of fair market value, up to 100 % ownership any applicable statutory limit Line from Schedule A/B: 19.3

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|  |  |   | Case number (if known)  |  |
|--|--|---|---|--|
|  | Current value of the portion you own   | Am  | ount of the exemption you claim   | Specific laws that allow exemption   |
|  | Copy the value from Check only one box for each exemption. Schedule A/B  |   |   |  |
|  | \$550,000.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
| 708 James Madison Hwy, Troy, VA<br>974. Debtor value=\$550,000.00<br>0 % ownership   |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$10,318.14  |   | \$10,318.14   | Va. Code Ann. § 34-34  |
| le IIOIII <i>Suriedule A/D.</i> <b>21.1</b>  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$10,694.73  |   | \$10,694.73   | Va. Code Ann. § 34-34  |
|  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$1.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
| io nom concada vive.   |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$1.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
|  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$75,000.00  |   | \$1.00  | Va. Code Ann. § 34-4   |
| eswidk, VA owned by Michael and ane Townes - I&J Home Builders, and at closing they fell short on the ortgage loan due to market langes, so Denise Jacks |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$1.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
|  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$1.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
|  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
|  | \$1.00   |   | \$1.00  | Va. Code Ann. § 34-4   |
|  |  |   | 100% of fair market value, up to any applicable statutory limit   |  |
| ubject to adjustment on 4/01/19 and every 3<br>No  | years after that for ca  | ses fi  |   |  |
|  | Denise F. Jackson  lef description of the property and line on hedule A/B that lists this property  Dute 15, LLC. Assets = Office siliding and two sheds located at 708 James Madison Hwy, Troy, VA 1974. Debtor value=\$550,000.00 00 % ownership the from Schedule A/B: 19.4  Detirement: LPL Financial SEP IRA the from Schedule A/B: 21.1  Detirement: LPL Financial SEP IRA the from Schedule A/B: 21.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 21.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 28.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 28.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 28.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 28.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 28.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 30.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 30.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 30.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.1  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.2  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.3  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.3  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.3  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.3  Determent: LPL Financial SEP IRA the from Schedule A/B: 31.3 | Denise F. Jackson  lef description of the property and line on hedule A/B that lists this property  Denite 15, LLC. Assets = Office stillding and two sheds located at 708 James Madison Hwy, Troy, VA 1974. Debtor value=\$550,000.00  Description of the property of the portion you own Copy the value from Schedule A/B: 19.4  Description of the property of the portion you own Copy the value from Schedule A/B: 19.4  Description of the property of the portion you own Copy the value from Schedule A/B: 19.4  Description of the property of the portion you own Copy the value from Schedule A/B: 19.4  Description of the property of the portion you own Copy the value from Schedule A/B: 19.4  Store of the value from Schedule A/B: 19.4  Store of the portion you own Copy the portion you own the portion you own Copy the portion you own the portion you own Copy the portion you own the portion you o | Denise F. Jackson  lef description of the property and line on hedule A/B that lists this property  Denise F. Jackson  lef description of the property and line on hedule A/B that lists this property  Denise F. Jackson  Current value of the proton you own  Copy the value from Schedule A/B that lists this property  S550,000.00  S550,000.00  S550,000.00  On wo ownership  In from Schedule A/B: 21.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 21.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 21.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 21.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 28.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.00  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 31.2  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 21.1  Destrement: LPL Financial SEP IRA  In from Schedule A/B: 21.1  Destrement: LPL Financial SEP IRA  In from | Denise F. Jackson  Case number (if known)  and description of the property and line on pedulue A/B that first shis property  Corpet walue from Schedule A/B: 31.2  Denise F. Jackson  Current value of the property and line on pedulue A/B that first shis property  Check only one box for each exemption. Schedule A/B: 31.2  Check only one box for each exemption. Schedule A/B: 31.3  Check only one box for each exemption. Schedule A/B: 31.0  Check only one box for each exemption. Schedule A/B: 21.00  Stone Schedule A/B: 21.1  Stone Schedule A/B: 21.1  Stone Schedule A/B: 21.1  Stone Schedule A/B: 21.2  Stone Schedul |

Official Form 106C

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Debtor 1 Ian R. Jackson
Debtor 2 Denise F. Jackson Case number (if known)

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| Fill in this informati                       | an ta idantifu var             |  |                          |  |                          |
|--|--------------------------------|--|--------------------------|--|--------------------------|
| Fill in this informati                       | on to identify you             | r case:  |                          |  |                          |
|  | lan R. Jackson                 |  |                          |  |                          |
|  | First Name                     | Middle Name Last Name  |                          |  |                          |
| _  | Denise F. Jackse<br>First Name | Middle Name Last Name  |                          |  |                          |
|  |                                |  |                          |  |                          |
| United States Bankru                         | uptcy Court for the:           | WESTERN DISTRICT OF VIRGINIA   |                          |  |                          |
| Case number                                  |                                |  |                          |  |                          |
| (if known)                                   |                                |  |                          | ☐ Check                                      | if this is an            |
|  |                                |  |                          | amend  | led filing               |
| Official Form 1                              | 06D                            |  |                          |  |                          |
| Official Form 1                              |                                | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |                          |  |                          |
| Schedule D:                                  | Creditors                      | Who Have Claims Secure   | ed by Property           | <u>/</u>                                     | 12/15                    |
|  |                                | f two married people are filing together, both are<br>but, number the entries, and attach it to this form.   |                          |  |                          |
| 1. Do any creditors hav                      | e claims secured by            | your property?   |                          |  |                          |
| _ `  | -                              | nis form to the court with your other schedules.   | You have nothing else to | report on this form.                         |                          |
| _  | of the information b           | •  |                          |  |                          |
|  |                                | Delow.   |                          |  |                          |
|  | ecured Claims                  |  | . Column A               | Column B                                     | Column C                 |
| for each claim. If more                      | than one creditor has          | nore than one secured claim, list the creditor separat<br>a particular claim, list the other creditors in Part 2. A<br>cal order according to the creditor's name. | ely                      | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Ally Bank                                |                                | Describe the property that secures the claim:  | \$4,500.00               | \$3,654.00                                   | \$846.00                 |
| Creditor's Name                              |                                | 2013 Chevrolet Volt 103258 miles   |                          |  |                          |
|  |                                | TAV=13,250.00<br>Debtor value=\$3654.00  |                          |  |                          |
|  |                                | Location: 2272 Oakridge Court,   |                          |  |                          |
| P O Box 3809                                 | 902                            | Charlottesville VA 22911   |                          |  |                          |
| Bloomington                                  |                                | As of the date you file, the claim is: Check all that apply.   | -                        |  |                          |
| 55438-0902                                   |                                | ☐ Contingent   |                          |  |                          |
| Number, Street, City                         | , State & Zip Code             | ☐ Unliquidated   |                          |  |                          |
|  |                                | Disputed   |                          |  |                          |
| Who owes the debt?                           | Check one.                     | Nature of lien. Check all that apply.  |                          |  |                          |
| Debtor 1 only                                |                                |  | secured                  |  |                          |
| ☐ Debtor 2 only                              | - O b                          | Statutory lien (such as tax lien, mechanic's lien)   |                          |  |                          |
| ■ Debtor 1 and Debtor  At least one of the d |                                | ☐ Judgment lien from a lawsuit   |                          |  |                          |
| ☐ Check if this claim                        |                                | ☐ Other (including a right to offset)  |                          |  |                          |
| community debt                               |                                |  |                          |  | _                        |
| Date debt was incurre                        | d 04/16/2013                   | Last 4 digits of account number 8763   | 3                        |  |                          |
| 2.2 Larry F. Greg                            | norv                           | Describe the property that secures the claim:  | \$248,000.00             | \$896,900.00                                 | \$168,196.00             |
| Creditor's Name                              | , o. y                         | 1. 661 Cedar Meadows Drive,  | φ240,000.00              | Ψοσο,σσοίσο                                  | <u> </u>                 |
|  |                                | Nellysford, VA 22958   |                          |  |                          |
|  |                                | (TAV=\$327,600)  |                          |  |                          |
|  |                                | 2. 123 Walk Around Lane,   |                          |  |                          |
|  |                                | Roseland, VA 22967 (TAV=459,300) 3. 115 Windsor Place, Buckingham,   |                          |  |                          |
|  |                                | VA (TAV - \$110,000)   |                          |  |                          |
| 3157 Carol C                                 | reek Road                      | As of the date you file, the claim is: Check all that apply.   | =                        |  |                          |
| Keswick, VA                                  |                                | Contingent   |                          |  |                          |
| Number, Street, City                         |                                | ■ Unliquidated   |                          |  |                          |
| ramber, oneer, only                          | , Julio a Zip Ooue             | ☐ Disputed   |                          |  |                          |
| Who owes the debt?                           | Check one.                     | Nature of lien. Check all that apply.  |                          |  |                          |
| Debtor 1 only                                |                                | ☐ An agreement you made (such as mortgage or   | secured                  |  |                          |
| Debtor 2 only                                |                                | car loan)  |                          |  |                          |

Official Form 106D

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| Debtor 1 Ian R. Jackson  |  | C                  | case number (if know) |              |             |
|--|--|--------------------|-----------------------|--------------|-------------|
| First Name Middle N  | lame Last Name   |                    |                       |              |             |
| Debtor 2 Denise F. Jackson  First Name Middle N  | lame Last Name   | _                  |                       |              |             |
| Thorread Windows   | Last Name  |                    |                       |              |             |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, me   | echanic's lien)    |                       |              |             |
| At least one of the debtors and another  | ☐ Judgment lien from a lawsuit   |                    |                       |              |             |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)  | Second Mor         | tgage                 |              |             |
| Date debt was incurred   | Last 4 digits of account num   | nber               |                       |              |             |
| 2.3 Nationstar Mortgage  | Describe the property that secures   | the claim:         | \$274,837.84          | \$220,000.00 | \$54,837.84 |
| Bankruptcy Notice PO Box 619094 Dallas, TX 75261-9741                                      | 19 Starboard Drive Bracey, 23919 Mecklenburg County Rental: House zoned reside with commercial contingen TAV = \$198,500 Debtors' value = \$220,000 As of the date you file, the claim is apply.  ☐ Contingent | y<br>ential<br>cy  |                       |              |             |
| Number, Street, City, State & Zip Code   | ☐ Unliquidated   |                    |                       |              |             |
| Who owes the debt? Check one.  | ☐ Disputed  Nature of lien. Check all that apply.  |                    |                       |              |             |
| Debtor 1 only  | An agreement you made (such as   | mortgage or secu   | ired                  |              |             |
| Debtor 2 only  | car loan)  |                    |                       |              |             |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, me   | echanic's lien)    |                       |              |             |
| At least one of the debtors and another  | ☐ Judgment lien from a lawsuit   |                    |                       |              |             |
| ☐ Check if this claim relates to a community debt  | ☐ Other (including a right to offset)  |                    |                       |              |             |
| Date debt was incurred 02/1/2007   | Last 4 digits of account num   | 15 7318            |                       |              |             |
| 2.4 Union Bank   | Describe the property that secures   | the claim:         | \$473,262.00          | \$550,000.00 | \$0.00      |
| PO BOX 940 Ruther Glen, VA 22546   | Route 15, LLC. Assets = Or building and two sheds loc 21708 James Madison Hwy VA 22974. Debtor value=\$550,000.00 100 % ownership  As of the date you file, the claim is apply.  Contingent                    | ated at<br>, Troy, |                       |              |             |
| <u> </u>   | _  |                    |                       |              |             |
| Number, Street, City, State & Zip Code   | ■ Unliquidated □ Disputed  |                    |                       |              |             |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.  |                    |                       |              |             |
| ☐ Debtor 1 only ☐ Debtor 2 only  | An agreement you made (such as car loan)   | mortgage or secu   | ired                  |              |             |
| ■ Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, me   | echanic's lien)    |                       |              |             |
| ☐ At least one of the debtors and another☐ Check if this claim relates to a community debt | ☐ Judgment lien from a lawsuit☐ Other (including a right to offset)  |                    |                       |              |             |
| Date debt was incurred   | Last 4 digits of account num   | nber 4250          |                       |              |             |
| 2.5 Union First Market Bank  | Describe the property that secures   | the claim:         | \$382,800.00          | \$420,000.00 | \$0.00      |

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| Debtor 1 Ian R. Jackson   | Case number (if know)   |              |              |   |
|---|---|--------------|--------------|---|
| First Name Middle N Debtor 2 <b>Denise F. Jackson</b>   |   |              |              |   |
| First Name Middle N   | lame Last Name  |              |              |   |
| P O Box 940 Ruther Glen, VA 22546   | 661 Cedar Meadows Drive, Nellysford, VA 22958 Nelson County Residence: Two story rental house TAV = \$327,600 Debtors' value = \$420,000 As of the date you file, the claim is: Check all that apply. |              |              |   |
| Number, Street, City, State & Zip Code  | <ul><li>■ Contingent</li><li>■ Unliquidated</li></ul>   |              |              |   |
| Who owes the debt? Check one.   | ☐ Disputed  Nature of lien. Check all that apply.   |              |              |   |
| ☐ Debtor 1 only ☐ Debtor 2 only   |   | secured      |              |   |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) First Mo  |              |              |   |
| community debt  |   |              |              |   |
| Date debt was incurred 03/28/2014   | Last 4 digits of account number 292   | 26           |              |   |
| 2.6 Union First Market Bank   | Describe the property that secures the claim:   | \$434,295.79 | \$550,000.00 | \$0.00                                  |
| Creditor's Name   | 123 Walk Around Lane Roseland,<br>VA 22967 Nelson County<br>Residence: Two story house on a<br>basement - rental property<br>TAV = \$459,300<br>Debtors' value = \$550,000                            |              |              |   |
| P O Box 940   | As of the date you file, the claim is: Check all that apply.  | _            |              |   |
| Ruther Glen, VA 22546   | Contingent  |              |              |   |
| Number, Street, City, State & Zip Code  | ■ Unliquidated  |              |              |   |
| Who owes the debt? Check one.   | ☐ Disputed  Nature of lien. Check all that apply.   |              |              |   |
| ☐ Debtor 1 only ☐ Debtor 2 only   | ☐ An agreement you made (such as mortgage or car loan)  | secured      |              |   |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)  | )            |              |   |
| At least one of the debtors and another  Check if this claim relates to a                                 | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) First Mo   | rtaane       |              |   |
| community debt  | Other (including a right to offset)   | rigago       |              |   |
| Date debt was incurred 11/7/2013  | Last 4 digits of account number 307   | 70           |              |   |
| 2.7 Union First Market Bank   | Describe the property that secures the claim:   | \$139,829.24 | \$115,500.00 | \$24,329.24                             |
| Creditor's Name   | 187 Windsor Place Buckingham, VA<br>23921 Buckingham County<br>Ranch house - rental property<br>As of the date you file, the claim is: Check all that   |              | <b>V</b> 2,7 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Ruther Glen, VA 22546   | apply.  Contingent  |              |              |   |
| Number, Street, City, State & Zip Code  Who owes the debt? Check one.                                     | ■ Unliquidated □ Disputed Nature of lien. Check all that apply.   |              |              |   |
| Debtor 1 only   | An agreement you made (such as mortgage or car loan)  | secured      |              |   |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien   | )            |              |   |
| At least one of the debtors and another   | ☐ Judgment lien from a lawsuit  | ,            |              |   |

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debtor 1 Ian R. Jackson   |   | Case number (if know) |              |            |
|---|---|-----------------------|--------------|------------|
| First Name Middle Na  | ame Last Name   |                       |              |            |
| Debtor 2 Denise F. Jackson First Name Middle Na   | ame Last Name   |                       |              |            |
|   |   |                       |              |            |
| ☐ Check if this claim relates to a community debt   | Other (including a right to offset)   |                       |              |            |
| Date debt was incurred 11/16/2009   | Last 4 digits of account number 0850  |                       |              |            |
| 2.8 Union First Market Bank   | Describe the property that secures the claim:   | \$115,797.23          | \$110,000.00 | \$5,797.23 |
| PO BOX 940 Ruther Glen, VA 22546  | 171 Windsor Place Buckingham, VA 23921 Residence: Single story ranch - rental property As of the date you file, the claim is: Check all that apply.  Contingent |                       |              |            |
| Number, Street, City, State & Zip Code  | ■ Unliquidated  |                       |              |            |
| Who owes the debt? Check one.   | ☐ Disputed  Nature of lien. Check all that apply.   |                       |              |            |
| ☐ Debtor 1 only ☐ Debtor 2 only   | An agreement you made (such as mortgage or se car loan)   | ecured                |              |            |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                       |              |            |
| At least one of the debtors and another   | ☐ Judgment lien from a lawsuit  |                       |              |            |
| ☐ Check if this claim relates to a community debt   | Other (including a right to offset)   |                       |              |            |
| Date debt was incurred 03/8/2008  | Last 4 digits of account number 2114  |                       |              |            |
| 2.9 Union First Market Bank Creditor's Name   | Describe the property that secures the claim:  115 Windsor Place Buckingham, VA   | \$115,000.00          | \$115,000.00 | \$0.00     |
| P O Box 940<br>Ruther Glen, VA 22546  | 23921 Buckingham County Debtor value  As of the date you file, the claim is: Check all that apply.  Contingent  |                       |              |            |
| Number, Street, City, State & Zip Code  | ■ Unliquidated  |                       |              |            |
|   | ☐ Disputed  |                       |              |            |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                       |              |            |
| ☐ Debtor 1 only ☐ Debtor 2 only   | An agreement you made (such as mortgage or se car loan)   | ecured                |              |            |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                       |              |            |
| ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)  |                       |              |            |
| Date debt was incurred 2008   | Last 4 digits of account number   |                       |              |            |
| 2.1 Union First Market Bank Creditor's Name   | Describe the property that secures the claim:  Lot 197 Shenandoah Crossing  | \$15,000.00           | \$15,000.00  | \$0.00     |
| P O Box 940<br>Ruther Glen, VA 22546  | As of the date you file, the claim is: Check all that apply.  Contingent  |                       |              |            |
| Number, Street, City, State & Zip Code  | ■ Unliquidated □ Disputed   |                       |              |            |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                       |              |            |
| ☐ Debtor 1 only ☐ Debtor 2 only   | ☐ An agreement you made (such as mortgage or secar loan)  | ecured                |              |            |

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debtor 1 lan R. Jackson                           |   | Case number (if know) |              |        |
|---|---|-----------------------|--------------|--------|
| First Name Middle N                               | lame Last Name  |                       |              |        |
| Debtor 2 Denise F. Jackson                        |   |                       |              |        |
| First Name Middle N                               | lame Last Name  |                       |              |        |
| Debter 4 and Debter 0 and                         | ☐ Statutory lien (such as tax lien, mechanic's lien)                                |                       |              |        |
| Debtor 1 and Debtor 2 only                        |   |                       |              |        |
| At least one of the debtors and another           | ☐ Judgment lien from a lawsuit  |                       |              |        |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset)   |                       |              |        |
| community dept                                    |   |                       |              |        |
| Date debt was incurred 2005                       | Last 4 digits of account number   |                       |              |        |
|   |   |                       |              |        |
| 2.1 Union First Market Bank                       | Describe the property that secures the claim:                                       | \$15,000.00           | \$15,000.00  | \$0.00 |
| Creditor's Name                                   | Lot 198 Shendoah Crossing, Louisa,  |                       | <u> </u>     | Ψ0.00  |
| Ciodilo: o Maine                                  | VA  |                       |              |        |
|   |   |                       |              |        |
| P O Box 940                                       | As of the date you file, the claim is: Check all that apply.                        |                       |              |        |
| Ruther Glen, VA 22546                             | Contingent  |                       |              |        |
| <u> </u>  | _   |                       |              |        |
| Number, Street, City, State & Zip Code            | Unliquidated  |                       |              |        |
| Who owes the debt? Check one.                     | ☐ Disputed  Nature of lien. Check all that apply.                                   |                       |              |        |
| _   |   |                       |              |        |
| Debtor 1 only                                     | An agreement you made (such as mortgage or s  | secured               |              |        |
| Debtor 2 only                                     | car loan)   |                       |              |        |
| Debtor 1 and Debtor 2 only                        | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit |                       |              |        |
| At least one of the debtors and another           | ·   |                       |              |        |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset)   |                       |              |        |
| Date debt was incurred                            | Last 4 digits of account number   |                       |              |        |
| Date dept was incurred                            | Last 4 digits of account number   |                       |              |        |
| 2.1   |   |                       |              |        |
| Union First Market Bank                           | Describe the property that secures the claim:                                       | \$128,000.00          | \$330,000.00 | \$0.00 |
| Creditor's Name                                   | 24 lots at Bald Eagle Cove  |                       |              |        |
|   | Subdivivion   |                       |              |        |
|   | As of the date you file, the claim is: Check all that                               |                       |              |        |
| P O Box 940                                       | apply.  |                       |              |        |
| Ruther Glen, VA 22546                             | Contingent  |                       |              |        |
| Number, Street, City, State & Zip Code            | Unliquidated  |                       |              |        |
|   | ☐ Disputed  |                       |              |        |
| Who owes the debt? Check one.                     | Nature of lien. Check all that apply.   |                       |              |        |
| ☐ Debtor 1 only                                   | An agreement you made (such as mortgage or s  | ecured                |              |        |
| Debtor 2 only                                     | car loan)   |                       |              |        |
| Debtor 1 and Debtor 2 only                        | ☐ Statutory lien (such as tax lien, mechanic's lien)                                |                       |              |        |
| ■ At least one of the debtors and another         | ☐ Judgment lien from a lawsuit  |                       |              |        |
| ☐ Check if this claim relates to a                | ☐ Other (including a right to offset)   |                       |              |        |
| community debt                                    | · · · · · · · · · · · · · · · · · · ·   |                       |              |        |
| Date debt was incurred                            | Last 4 digits of account number   |                       |              |        |
|   |   |                       |              |        |
| 2.1   |   | *                     | *            |        |
| 3 Union First Market Bank                         | Describe the property that secures the claim:                                       | \$200,000.00          | \$200,000.00 | \$0.00 |
| Creditor's Name                                   | Lot 67-2-E Three Notch Road   |                       |              |        |
|   |   |                       |              |        |
|   | As of the date you file, the claim is: Check all that                               |                       |              |        |
| P O Box 940                                       | apply.  |                       |              |        |
| Ruther Glen, VA 22546                             | Contingent  |                       |              |        |
| Number, Street, City, State & Zip Code            | Unliquidated  |                       |              |        |
|   | ☐ Disputed  |                       |              |        |
| Who ower the deht? Check one                      | Nature of lien. Check all that apply  |                       |              |        |

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debto  | or 1 Ian R. Jackson                             |  | Case number (if know) |              |             |
|--------|---|--|-----------------------|--------------|-------------|
|        |   | ddle Name Last Name  |                       |              |             |
| Debto  | Denise F. Jackson                               |  |                       |              |             |
|        | First Name Mi                                   | ddle Name Last Name  |                       |              |             |
|        |   | _  |                       |              |             |
|        | btor 1 only                                     | An agreement you made (such as mortgage or sect                                  | ured                  |              |             |
|        | btor 2 only                                     | car loan)  |                       |              |             |
| _      | btor 1 and Debtor 2 only                        | ☐ Statutory lien (such as tax lien, mechanic's lien)                             |                       |              |             |
| At     | least one of the debtors and another            |  |                       |              |             |
|        | eck if this claim relates to a<br>ommunity debt | Other (including a right to offset)  |                       |              |             |
| Date o | debt was incurred 2005                          | Last 4 digits of account number  |                       |              |             |
|        |   |  |                       |              |             |
| 2.1    | Union First Market Bank                         | C Describe the property that secures the claim:                                  | \$38,649.00           | \$38,649.00  | \$0.00      |
|        | Creditor's Name                                 | Lots 1 and 11, Tudor Place,  |                       |              |             |
|        |   | Buckingham, VA   |                       |              |             |
|        |   | As of the date you file, the claim is: Check all that                            |                       |              |             |
|        | P O Box 940                                     | apply.   |                       |              |             |
|        | Ruther Glen, VA 22546                           | Contingent   |                       |              |             |
|        | Number, Street, City, State & Zip Code          | ■ Unliquidated   |                       |              |             |
|        |   | ☐ Disputed   |                       |              |             |
| Who    | owes the debt? Check one.                       | Nature of lien. Check all that apply.  |                       |              |             |
| ☐ De   | btor 1 only                                     | ■ An agreement you made (such as mortgage or sect                                | ıred                  |              |             |
|        | btor 2 only                                     | car loan)  | aled .                |              |             |
|        | btor 1 and Debtor 2 only                        | ☐ Statutory lien (such as tax lien, mechanic's lien)                             |                       |              |             |
| _      | least one of the debtors and ano                |  |                       |              |             |
| _      | eck if this claim relates to a                  | ☐ Other (including a right to offset)  |                       |              |             |
|        | ommunity debt                                   | Cities (including a right to onset)  |                       |              |             |
| Date o | lebt was incurred 2005                          | Last 4 digits of account number  |                       |              |             |
|        |   | <del></del>  |                       |              |             |
| 2.1    |   |  |                       |              |             |
| 5      | United Bank                                     | Describe the property that secures the claim:                                    | \$470,000.00          | \$380,000.00 | \$90,000.00 |
|        | Creditor's Name                                 | 101 West Park Drive Charlottesville,   |                       |              |             |
|        |   | VA 22901 Albemarle County  |                       |              |             |
|        |   | Rental: Four apartments. Debtors   |                       |              |             |
|        |   | plan to live in one and rent the other   |                       |              |             |
|        |   | three. TAV = \$507,400   |                       |              |             |
|        | P O Box 11286                                   | Debtors' value = \$380,000 As of the date you file, the claim is: Check all that |                       |              |             |
|        | Charleston, NC                                  | apply.   |                       |              |             |
| _      | 25339-1286                                      | Contingent   |                       |              |             |
|        | Number, Street, City, State & Zip Code          | Unliquidated   |                       |              |             |
|        |   | ☐ Disputed   |                       |              |             |
| Who    | owes the debt? Check one.                       | Nature of lien. Check all that apply.  |                       |              |             |
|        | btor 1 only                                     | An agreement you made (such as mortgage or sect                                  | ured                  |              |             |
| ☐ De   | btor 2 only                                     | car loan)  |                       |              |             |
| ☐ De   | btor 1 and Debtor 2 only                        | Statutory lien (such as tax lien, mechanic's lien)                               |                       |              |             |
| At     | least one of the debtors and another            | ther   |                       |              |             |
|        | eck if this claim relates to a<br>ommunity debt | Other (including a right to offset) First Mortga                                 | age                   |              |             |
| Date o | debt was incurred05/19/20                       | 11 Last 4 digits of account number 0392  |                       |              |             |
|        |   |  |                       |              |             |
| 2.1    |   |  | \$158,894.71          |              |             |

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| Debtor                     | r 1                | lan R. Jac                        | kson                    |                               |   | Ca             | ase number (if know)   |
|----------------------------|--------------------|-----------------------------------|-------------------------|-------------------------------|---|----------------|--|
| First Name Middle Name     |                    |                                   | ame                     | Last Name                     |   |                |  |
| Debtor 2 Denise F. Jackson |                    |                                   |                         |                               |   |                |  |
| First Name Middle N        |                    | Middle N                          | ame                     | Last Name                     |   |                |  |
| C                          | Credito            | or's Name                         |                         | Mecklenb<br>Rental: S         | or Cove Bracey, VA 2<br>ourg County<br>Single story ranch | 23919          |  |
|                            |                    |                                   |                         | TAV = \$1                     | te you file, the claim is: Che                            | ock all that   |  |
| -                          | _                  | Box 21948                         | -                       | apply.                        | te you me, the claim is. one                              | ock all triat  |  |
| _                          | aga                | an, MN 551                        | 121                     | ☐ Continger                   | nt  |                |  |
| N                          | lumbe              | er, Street, City, S               | State & Zip Code        | □ Unliquida                   | ted   |                |  |
|                            |                    |                                   |                         | Disputed                      |   |                |  |
| Who o                      | wes                | the debt? C                       | heck one.               | Nature of lie                 | en. Check all that apply.                                 |                |  |
| ☐ Deb                      | otor 1             | only                              |                         | An agree                      | ment you made (such as mor                                | tgage or secur | red  |
| ☐ Deb                      | otor 2             | only                              |                         | car loan)                     |   |                |  |
| ☐ Deb                      | otor 1             | and Debtor 2                      | only                    | □ Statutory                   | lien (such as tax lien, mecha                             | nic's lien)    |  |
| At le                      | east o             | one of the deb                    | tors and another        | ☐ Judgmen                     | t lien from a lawsuit                                     |                |  |
|                            |                    | f this claim re<br>inity debt     | elates to a             | Other (inc                    | cluding a right to offset)                                |                |  |
| Date de                    | ebt w              | vas incurred                      | 06/11/2008              | Last 4                        | 4 digits of account number                                | 7941           |  |
| If this                    | s is t             | he last page of<br>t number here  | of your form, add<br>e: | the dollar valu               | nis page. Write that number ue totals from all pages.     | here:          | \$3,213,865.81<br>\$3,213,865.81   |
| Part 2                     | L                  | ist Others t                      | o Be Notified fo        | r a Debt Tha                  | t You Already Listed                                      |                |  |
| trying t                   | to co<br>ne cr     | llect from yo                     | u for a debt you o      | we to someon<br>you listed in | ne else, list the creditor in P                           | art 1, and the | Iready listed in Part 1. For example, if a collection agency is in list the collection agency here. Similarly, if you have more If you do not have additional persons to be notified for any |
|                            |                    |                                   | reet, City, State & 2   | Zip Code                      |   | On which       | line in Part 1 did you enter the creditor? 2.16  |
|                            | РО                 | Box 2548<br>esburg, VA            | •                       |                               |   | Last 4 digi    | its of account number 4622   |
|                            | Nam<br><b>HS</b> E |                                   | reet, City, State & 2   | Zip Code                      |   | On which       | line in Part 1 did you enter the creditor? 2.3   |
|                            |                    | ortgage W<br>unt Laurel,          | /ay<br>, NJ 08054       |                               |   | Last 4 digi    | jits of account number   |
|                            |                    | e, Number, St<br><b>Bank Mort</b> | reet, City, State & 2   | Zip Code                      |   | On which       | line in Part 1 did you enter the creditor? 2.16  |
|                            | РΟ                 | Box 79041                         | -                       | 5                             |   | Last 4 digi    | its of account number  |

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| Fill in this  | information to identify your case  | :  |   |  |   |   |
|---|--|--|---|--|---|---|
| Debtor 1  | Ian R. Jackson First Name  | Middle Name  | Last Name   |  |   |   |
| Debtor 2  | Denise F. Jackson  | Middle Name  | Last Name   |  |   |   |
| (Spouse if, filing  |  | Middle Name  | Last Name   |  |   |   |
| United Sta  | tes Bankruptcy Court for the: WE   | ESTERN DISTRICT OF VIRG  | SINIA   |  |   |   |
| Case num  | hor  |  |   |  |   |   |
| (if known)  |  |  |   |  | п   | Check if this is an   |
|   |  |  |   |  |   | amended filing  |
| O(() -1 -1  | E 400E/E   |  |   |  |   |   |
|   | Form 106E/F  |  | <b>.</b>  |  |   | 40/45   |
|   | ILE E/F: Creditors Who lete and accurate as possible. Use Par  |  |   |  |   | 12/15   |
| eft. Attach t<br>name and ca  | Creditors Who Have Claims Secured<br>he Continuation Page to this page. If y<br>ase number (if known).   | you have no information to repo  |   |  |   |   |
|   | List All of Your PRIORITY Unsecu   |  |   |  |   |   |
|   |  |  |   |  |   |   |
|   | creditors have priority unsecured clai   | ims against you?   |   |  |   |   |
| □ No.   | Go to Part 2.  | ims against you?   |   |  |   |   |
| □ No. ■ Yes   | Go to Part 2.  |  |   |  |   |   |
| ☐ No.  ☐ Yes  2. List all identify possible   | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc   | creditor has more than one priorit<br>h priority and nonpriority amounts<br>ording to the creditor's name. If yo   | i, list that claim here a<br>ou have more than tw   | and show both priority a   | ind nonpriorit                                    | y amounts. As much as   |
| ☐ No.  ☐ Yes  2. List all identify possible Part 1.   | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot a, list the claims in alphabetical order acc if more than one creditor holds a particular  | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If your claim, list the other creditors in   | , list that claim here a<br>ou have more than tw<br>Part 3.   | and show both priority a   | ind nonpriorit                                    | y amounts. As much as   |
| ☐ No.  ☐ Yes  2. List all identify possible Part 1.   | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc   | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If your claim, list the other creditors in   | , list that claim here a<br>ou have more than tw<br>Part 3.   | and show both priority a   | ind nonpriorit                                    | y amounts. As much as   |
| No. Yes  2. List all identify possible Part 1. (For an  | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot a, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the uckingham County Treasurer  | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If your claim, list the other creditors in   | , list that claim here a<br>ou have more than tw<br>Part 3.<br>nstruction booklet.)   | and show both priority a<br>no priority unsecured cla  | nd nonpriority aims, fill out the priority amount | y amounts. As much as he Continuation Page of Nonpriority                 |
| No. Yes  Yes  List all identify possible Part 1. (For an  | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the claim County Treasurer ority Creditor's Name  | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in the instructions for this form in the interpretable.  Last 4 digits of account  | , list that claim here a pu have more than tw Part 3. nstruction booklet.)  | and show both priority a<br>no priority unsecured cla<br>Total claim                               | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| No.  Yes  2. List all identify possible Part 1.  (For an  | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot a, list the claims in alphabetical order acc if more than one creditor holds a particula explanation of each type of claim, see the uckingham County Treasurer ority Creditor's Name  O. Box 106   | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If your claim, list the other creditors in the instructions for this form in the in  | , list that claim here a pu have more than tw Part 3. nstruction booklet.)  | and show both priority a<br>no priority unsecured cla<br>Total claim                               | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
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| □ No. ■ Yes  2. List all identify possible Part 1. (For an Pri Pri P. Bt Nu Who i □ De                      | of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particula explanation of each type of claim, see the claims are controlled to the control of the  | creditor has more than one priorit h priority and nonpriority amounts ording to the creditor's name. If your claim, list the other creditors in e instructions for this form in the in  Last 4 digits of account When was the debt incue  As of the date you file, to Contingent   | , list that claim here a pu have more than tw Part 3. nstruction booklet.)  t number 1807  urred?                                       | and show both priority a priority and show both priority unsecured claim                           | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| Pri No.  Yes  2. List all identify possible Part 1. (For an Pri P. Bu Nu Who i                              | of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the cuckingham County Treasurer ority Creditor's Name  O. Box 106  Lickingham, VA 23921  Imber Street City State Zlp Code neurred the debt? Check one.   | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in the instructions for this form in the interpretation of the count when was the debt incompleted as of the date you file, the Contingent Unliquidated  | t number 1807  the claim is: Check a  | and show both priority a priority and show both priority unsecured claim                           | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| □ No. ■ Yes  2. List all identify possible Part 1. (For an Pri Pri Pu De □ De | Go to Part 2.  of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the claim of each type of claim, see the  | creditor has more than one priorit h priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in e instructions for this form in the in  Last 4 digits of account When was the debt incompleted with the date you file, the Contingent Unliquidated Disputed  | ist that claim here a cou have more than twe Part 3. Instruction booklet.) It number 1807  urred? Ithe claim is: Check a coursed claim: | and show both priority a priority and show both priority unsecured claim                           | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| Pri No.  Yes  2. List all identify possible Part 1. (For an  2.1 Bu Pri P. Bu Nu Who i                      | of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particula explanation of each type of claim, see the claim of each type of claim, see the claim of each type of claim, see the claim of each type of claim, see the claim of each type of claim, see the claim of each type of clai | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in the instructions for this form in the incomplete that the control of the  | t number 1807  the claim is: Check a curred claim: igations   | and show both priority a so priority unsecured claim  **Total claim  **\$4,972.75*  all that apply | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| □ No. ■ Yes  2. List all identify possible Part 1. (For an Pri P. Bund Who i □ De □ De □ De □ Ch            | of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the claim of each t | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in the instructions for this form in the incomplete the control of the contr | t number 1807  treed?  the claim is: Check a cured claim: igations are debts you owe the  | and show both priority a zo priority unsecured claim  Total claim  \$4,972.75  all that apply      | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |
| □ No. ■ Yes  2. List all identify possible Part 1. (For an Pri P. Bund Who i □ De □ De □ De □ Ch            | of your priority unsecured claims. If a what type of claim it is. If a claim has bot e, list the claims in alphabetical order acc if more than one creditor holds a particular explanation of each type of claim, see the claim of each type of claim of each type of claim of the claim is for a community diclaim subject to offset?   | creditor has more than one priorith priority and nonpriority amounts ording to the creditor's name. If year claim, list the other creditors in the instructions for this form in the incomplete the control of the contr | t number 1807  treed?  the claim is: Check a cured claim: igations are debts you owe the  | and show both priority a zo priority unsecured claim  Total claim  \$4,972.75  all that apply      | nd nonpriority aims, fill out the priority amount | y amounts. As much as<br>he Continuation Page of<br>Nonpriority<br>amount |

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|     | or 1 lan R. Jackson or 2 Denise F. Jackson                           |  | Case nu       | umber (if know)   |              |        |
|-----|--|--|---------------|-------------------|--------------|--------|
| 2.2 | County of Fluvanna Priority Creditor's Name                          | Last 4 digits of account number                                      | 9394          | \$27,881.96       | \$27,881.96  | \$0.00 |
|     | P O Box 299  | When was the debt incurred?  | 06/5/2016     | 6                 |              |        |
|     | Palmyra, VA 22963  Number Street City State Zlp Code                 | As of the date you file, the claim                                   | is: Check all | that apply        |              |        |
| ١   | Who incurred the debt? Check one.                                    | ☐ Contingent   |               | ,                 |              |        |
| [   | Debtor 1 only  | ☐ Unliquidated   |               |                   |              |        |
| [   | Debtor 2 only  | ☐ Disputed   |               |                   |              |        |
| [   | Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured cla                                       | ıim:          |                   |              |        |
| _   | At least one of the debtors and another                              | Domestic support obligations   |               |                   |              |        |
| ſ   | ☐ Check if this claim is for a community debt                        | ■ Taxes and certain other debts y □ Claims for death or personal inj | _             |                   |              |        |
| _   | ■ No   | Other. Specify   |               |                   |              |        |
| [   | Yes  | Property to property   | axes on ve    | ehicles and busin | ess personal |        |
| 2.3 | County of Mecklenburg Priority Creditor's Name                       | Last 4 digits of account number                                      | xxx           | \$6,916.02        | \$6,916.02   | \$0.00 |
|     | P O Box 250<br>Boydton, VA 23917                                     | When was the debt incurred?  | 06/5/2016     | 6                 |              |        |
|     | Number Street City State Zlp Code                                    | As of the date you file, the claim                                   | is: Check all | that apply        |              |        |
| _   | Who incurred the debt? Check one.                                    | ☐ Contingent   |               |                   |              |        |
|     | Debtor 1 only  | ☐ Unliquidated   |               |                   |              |        |
| [   | Debtor 2 only  | ☐ Disputed   |               |                   |              |        |
| [   | Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured cla                                       | ıim:          |                   |              |        |
| ı   | At least one of the debtors and another                              | ☐ Domestic support obligations                                       |               |                   |              |        |
| [   | ☐ Check if this claim is for a community debt                        | ■ Taxes and certain other debts y                                    | ou owe the go | overnment         |              |        |
| ŀ   | Is the claim subject to offset?                                      | ☐ Claims for death or personal inj                                   | ury while you | were intoxicated  |              |        |
|     | ■ No   | Other. Specify   |               |                   |              |        |
| [   | ☐ Yes  | Property to  | axes          |                   |              |        |
| 2.4 | Fluvanna County Priority Creditor's Name                             | Last 4 digits of account number                                      | 9393          | \$628.42          | \$628.42     | \$0.00 |
|     | P O Box 299  | When was the debt incurred?  |               |                   |              |        |
|     | Palmyra, VA 22963  | As of the data was file the plains                                   | : OL L II     |                   |              |        |
| ١   | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                                   | is: Check all | tnat apply        |              |        |
|     | Debtor 1 only  | ☐ Contingent   |               |                   |              |        |
|     | Debtor 2 only  | ☐ Unliquidated   |               |                   |              |        |
|     | Debtor 1 and Debtor 2 only   | Disputed   | ılmı.         |                   |              |        |
| _   | _  | Type of PRIORITY unsecured cla  ☐ Domestic support obligations       | unt:          |                   |              |        |
|     | At least one of the debtors and another                              | .,   |               |                   |              |        |
|     | Check if this claim is for a community debt                          | Taxes and certain other debts y                                      |               |                   |              |        |
| _   | ls the claim subject to offset? ■                                    | Claims for death or personal inj                                     | ury while you | were intoxicated  |              |        |
|     | ■ No<br>□ Yes  | Other. Specify Property to   | voe on U      | onda Civic        |              |        |
| L   | <b>⊔</b> 1€5   | riopeity ta  | AVES OII U(   | unua Civic        |              |        |

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson   | Case number (if know)                         |                     |            |        |  |
|--|---|---------------------|------------|--------|--|
| 2.5 Fluvanna County                                  | Last 4 digits of account number               | \$6,290.97          | \$6,290.97 | \$0.00 |  |
| Priority Creditor's Name                             |   |                     |            | *      |  |
| P O Box 299  | When was the debt incurred?                   |                     |            |        |  |
| Palmyra, VA 22963  Number Street City State Zlp Code | As of the date you file, the claim is: Check  | all that apply      |            |        |  |
| Who incurred the debt? Check one.                    | ☐ Contingent                                  | ан тасарыу          |            |        |  |
| Debtor 1 only  |   |                     |            |        |  |
| Debtor 2 only  | ☐ Unliquidated                                |                     |            |        |  |
| _  | ☐ Disputed                                    |                     |            |        |  |
| Debtor 1 and Debtor 2 only                           | Type of PRIORITY unsecured claim:             |                     |            |        |  |
| At least one of the debtors and another              | ☐ Domestic support obligations                |                     |            |        |  |
| ☐ Check if this claim is for a community debt        | Taxes and certain other debts you owe the     | e government        |            |        |  |
| Is the claim subject to offset?                      | ☐ Claims for death or personal injury while y | ou were intoxicated |            |        |  |
| ■ No   | Other. Specify                                |                     |            |        |  |
| Yes  | Property taxes                                |                     |            |        |  |
|  | TMP 5-11-5B                                   |                     |            |        |  |
| 2.6 Greene County Treasurer                          | Last 4 digits of account number               | \$1,819.37          | \$1,819.37 | \$0.00 |  |
| Priority Creditor's Name P.O. Box 157                | When was the debt incurred?                   |                     |            |        |  |
| Stanardsville, VA 22973-0157                         | when was the debt incurred?                   |                     |            |        |  |
| Number Street City State Zlp Code                    | As of the date you file, the claim is: Check  | all that apply      |            |        |  |
| Who incurred the debt? Check one.                    | ☐ Contingent                                  |                     |            |        |  |
| Debtor 1 only  | ☐ Unliquidated                                |                     |            |        |  |
| Debtor 2 only  | ☐ Disputed                                    |                     |            |        |  |
| ☐ Debtor 1 and Debtor 2 only                         | Type of PRIORITY unsecured claim:             |                     |            |        |  |
| <u>_</u>   | Domestic support obligations                  |                     |            |        |  |
| At least one of the debtors and another              | _   |                     |            |        |  |
| ☐ Check if this claim is for a community debt        | Taxes and certain other debts you owe the     | =                   |            |        |  |
| Is the claim subject to offset?                      | Claims for death or personal injury while y   | ou were intoxicated |            |        |  |
| ■ No   | Other. Specify                                |                     |            |        |  |
| Yes  | Business License                              |                     |            |        |  |
| 2.7 Louisa County Treasurer                          | Last 4 digits of account number               | \$2,779.00          | \$2,779.00 | \$0.00 |  |
| Priority Creditor's Name P.O. Box 523                | When was the debt incurred?                   |                     |            |        |  |
| Louisa, VA 23093                                     | When was the dest mounted.                    |                     |            |        |  |
| Number Street City State Zlp Code                    | As of the date you file, the claim is: Check  | all that apply      |            |        |  |
| Who incurred the debt? Check one.                    | ☐ Contingent                                  |                     |            |        |  |
| Debtor 1 only  | ☐ Unliquidated                                |                     |            |        |  |
| Debtor 2 only  | ☐ Disputed                                    |                     |            |        |  |
| ☐ Debtor 1 and Debtor 2 only                         | Type of PRIORITY unsecured claim:             |                     |            |        |  |
| ■ At least one of the debtors and another            | ☐ Domestic support obligations                |                     |            |        |  |
| ☐ Check if this claim is for a community debt        | Taxes and certain other debts you owe the     | e government        |            |        |  |
| Is the claim subject to offset?                      | ☐ Claims for death or personal injury while y |                     |            |        |  |
| ■ No   | Other. Specify                                |                     |            |        |  |
| □Yes   |   | E and 1061-1-198 an | nd 197     |        |  |

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|         | 1 lan R. Jackson<br>2 Denise F. Jackson  |   | Case number (if know)                   |                           |                           |  |  |
|---------|--|---|---|---------------------------|---------------------------|--|--|
| 2.8     | Nelson County Treasurer  | Last 4 digits of account number   | \$3,179.36                              | \$3,179.36                | \$0.00                    |  |  |
|         | Priority Creditor's Name P.O. Box 100  | When was the debt incurred?   |   |                           | ·                         |  |  |
|         | Lovingston, VA 22949  Number Street City State Zlp Code  | As of the date you file, the claim is:  | Check all that apply                    |                           |                           |  |  |
| W       | ho incurred the debt? Check one.   | ☐ Contingent  | 11.7                                    |                           |                           |  |  |
|         | Debtor 1 only  | ☐ Unliquidated  |   |                           |                           |  |  |
|         | Debtor 2 only  | ☐ Disputed  |   |                           |                           |  |  |
|         | Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured claim:   |   |                           |                           |  |  |
|         | At least one of the debtors and another  | ☐ Domestic support obligations  |   |                           |                           |  |  |
|         | Check if this claim is for a community debt  | ■ Taxes and certain other debts you   | owe the government                      |                           |                           |  |  |
| Is      | the claim subject to offset?   | ☐ Claims for death or personal injury   | while you were intoxicated              |                           |                           |  |  |
|         | No   | Other. Specify  |   |                           |                           |  |  |
|         | l Yes  | RE taxes  |   |                           |                           |  |  |
| 4. List | Yes.  t all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each c n one creditor holds a particular claim, list the other t 2. | laim. For each claim listed, identify what t                                  | type of claim it is. Do not list claims | s already included in Par | t 1. If more<br>n Page of |  |  |
| 4.1     | A&M Supply Corp.   | Last 4 digits of account number   | 2096                                    | 5                         | \$43,420.87               |  |  |
|         | Nonpriority Creditor's Name<br>PO Box 919393<br>Orlando, FL  | When was the debt incurred?   | 2016                                    |                           |                           |  |  |
|         | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim  | is: Check all that apply                |                           |                           |  |  |
|         | ☐ Debtor 1 only  | ☐ Contingent  |   |                           |                           |  |  |
|         | ☐ Debtor 2 only  | ☐ Unliquidated  |   |                           |                           |  |  |
|         | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |                           |                           |  |  |
|         | At least one of the debtors and another  | Type of NONPRIORITY unsecure  | d claim:                                |                           |                           |  |  |
|         | ☐ Check if this claim is for a community debt  | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> | ration agreement or divorce that y      | ou did not                |                           |  |  |
|         | Is the claim subject to offset?  | report as priority claims   |   |                           |                           |  |  |
|         | No   | ☐ Debts to pension or profit-sharin   | 01                                      |                           |                           |  |  |
|         | Yes  | Other. Specify Building m   | aterials                                |                           |                           |  |  |

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|     | r 1 Ian R. Jackson r 2 Denise F. Jackson  | Case number (if know)   |              |
|-----|---|---|--------------|
| 4.2 | ABC Supply Co. Inc.   | Last 4 digits of account number 8871  | \$112,684.28 |
|     | Nonpriority Creditor's Name P O Box 402117 Atlanta, GA 30384-2117                               | When was the debt incurred?   |              |
|     | Number Street City State Zlp Code Who incurred the debt? Check one.                             | As of the date you file, the claim is: Check all that apply   |              |
|     | Debtor 1 only   | ☐ Contingent  |              |
|     | Debtor 2 only   | ☐ Unliquidated  |              |
|     | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |              |
|     | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |              |
|     | ☐ Check if this claim is for a community  | ☐ Student loans   |              |
|     | debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |              |
|     | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |              |
|     | Yes   | ■ Other. Specify Materials purchased  |              |
| 4.3 | Albemarle County  | Last 4 digits of account number 2799  | \$346.62     |
|     | Nonpriority Creditor's Name 401 McIntire Road Room 130 Charlottesville, VA 22902                | When was the debt incurred?   |              |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.                            | As of the date you file, the claim is: Check all that apply   |              |
|     | Debtor 1 only   | Поли  |              |
|     | Debtor 2 only   | ☐ Contingent  |              |
|     | _   | ☐ Unliquidated  |              |
|     | ■ Debtor 1 and Debtor 2 only  | Disputed  |              |
|     | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  ☐ Student loans   |              |
|     | ☐ Check if this claim is for a community debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |              |
|     | Is the claim subject to offset?   | report as priority claims   |              |
|     | No  | Debts to pension or profit-sharing plans, and other similar debts   |              |
|     | Yes   | ■ Other. Specify Late charge on business license  |              |
| 4.4 | Albemarle County Fire and Rescue  | Last 4 digits of account number XX  | \$500.00     |
|     | Nonpriority Creditor's Name 460 Stagecoach Rd Suite F   | When was the debt incurred? 04/2/2016   |              |
|     | Charlottesville, VT 22902  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |              |
|     | Debtor 1 only   |   |              |
|     | Debtor 2 only   | ☐ Contingent  |              |
|     | _   | ☐ Unliquidated  |              |
|     | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |              |
|     | At least one of the debtors and another   | Student loans   |              |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?                   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|     | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |              |
|     | ☐ Yes   |   |              |
|     | □ res   | ■ Other. Specify Burn permit  |              |

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|     | lan R. Jackson Denise F. Jackson                              | Case number (if know)   |   |                   |  |
|-----|---|---|---|-------------------|--|
| 4.5 | Alliad comparate line   | Look A digito of account number                                   |   | <b>*</b> C 000 00 |  |
|     | Allied concrete, Inc. Nonpriority Creditor's Name PO Box 1647 | Last 4 digits of account number  When was the debt incurred?      |   | \$6,000.00        |  |
|     | Charlottesville, VA 22902                                     |   |   |                   |  |
|     | Number Street City State Zlp Code                             | As of the date you file, the claim                                | is: Check all that apply                        |                   |  |
|     | Who incurred the debt? Check one.                             |   |   |                   |  |
|     | Debtor 1 only   | ☐ Contingent  |   |                   |  |
|     | Debtor 2 only   | ☐ Unliquidated  |   |                   |  |
|     | Debtor 1 and Debtor 2 only                                    | ☐ Disputed  |   |                   |  |
|     | At least one of the debtors and another                       | Type of NONPRIORITY unsecure                                      | d claim:  |                   |  |
|     | ☐ Check if this claim is for a community                      | ☐ Student loans   |   |                   |  |
|     | debt  |   | aration agreement or divorce that you did not   |                   |  |
|     | Is the claim subject to offset?                               | report as priority claims   |   |                   |  |
|     | No  | Debts to pension or profit-sharing                                |   |                   |  |
|     | ☐ Yes   | ■ Other. Specify Building st                                      | upplies   |                   |  |
|     |   |   | IJHOMEBUI                                       |                   |  |
|     | Allied Portable Toilets                                       | Last 4 digits of account number                                   | <u>L</u>  | \$4,358.28        |  |
|     | Nonpriority Creditor's Name P O Box 939                       | When was the debt incurred?                                       |   |                   |  |
|     | Crozet, VA 22932  Number Street City State Zlp Code           | As of the date you file, the claim                                |   |                   |  |
|     | Who incurred the debt? Check one.                             | 710 of the date you me, the slam                                  | one on that apply                               |                   |  |
|     | Debtor 1 only   | ☐ Contingent  |   |                   |  |
|     | Debtor 2 only   | ☐ Unliquidated  |   |                   |  |
|     | Debtor 1 and Debtor 2 only                                    | ·   |   |                   |  |
|     | At least one of the debtors and another                       | ☐ Disputed  Type of NONPRIORITY unsecure                          | d claim:  |                   |  |
|     | _   | ☐ Student loans   |   |                   |  |
|     | ☐ Check if this claim is for a community debt                 | _   | aration agreement or divorce that you did not   |                   |  |
|     | Is the claim subject to offset?                               | report as priority claims   | aration agreement of divorce that you did not   |                   |  |
|     | ■ No  | Debts to pension or profit-sharing                                |   |                   |  |
|     | ☐ Yes   | Other. Specify Portable toilets                                   |   |                   |  |
| 4.7 | American Express  | Last 4 digits of account number                                   | 2006  | \$144.225.24      |  |
|     | Nonpriority Creditor's Name                                   | _   |   | · ,               |  |
|     | P O Box 1270<br>Newark, NJ 07101-1270                         | When was the debt incurred?                                       | Date Opened: 01/1/2006 Last<br>Used: 08/17/2016 |                   |  |
|     | Number Street City State Zlp Code                             | As of the date you file, the claim                                | is: Check all that apply                        |                   |  |
| ,   | Who incurred the debt? Check one.                             |   |   |                   |  |
|     | Debtor 1 only   | ☐ Contingent  |   |                   |  |
|     | Debtor 2 only   | ☐ Unliquidated ☐ Disputed   |   |                   |  |
|     | Debtor 1 and Debtor 2 only                                    |   |   |                   |  |
|     | At least one of the debtors and another                       | ·   |   |                   |  |
|     | ☐ Check if this claim is for a community                      | ☐ Student loans   |   |                   |  |
|     | debt  | Obligations arising out of a sepa                                 |   |                   |  |
|     | Is the claim subject to offset?                               | report as priority claims   |   |                   |  |
|     | No  | Debts to pension or profit-sharing plans, and other similar debts |   |                   |  |
|     | ☐ Yes   | Other. Specify Membersh   | ip Rewards 157,348                              |                   |  |

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|     | r 1 Ian R. Jackson <sup>7 2</sup> Denise F. Jackson                                    |  | Case number (if know)                                 |            |
|-----|--|--|---|------------|
| 4.8 | Aqua Air   | Last 4 digits of account number  | 460   | \$235.00   |
|     | Nonpriority Creditor's Name 627 Dice Street Charlottesville, VA 22903                  | When was the debt incurred?  | 05/31/2016  |            |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.                   | As of the date you file, the claim   | s: Check all that apply                               |            |
|     | ☐ Debtor 1 only ☐ Debtor 2 only  | Contingent   |   |            |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Unliquidated☐ Disputed   |   |            |
|     | ☐ At least one of the debtors and another☐ Check if this claim is for a community debt |  | d claim: ration agreement or divorce that you did not |            |
|     | Is the claim subject to offset?  | report as priority claims  Debts to pension or profit-sharing                  | g plans, and other similar debts                      |            |
|     | ☐ Yes  | Other. Specify Water testi   | ng  |            |
| 4.9 | ATEK Environmental & Soil Testing Nonpriority Creditor's Name                          | Last 4 digits of account number  |   | \$2,250.00 |
|     | 1488 Huron Ct Harrisonburg, VA 22801 Number Street City State Zlp Code                 | When was the debt incurred?  As of the date you file, the claim                | s: Check all that apply                               |            |
|     | Who incurred the debt? Check one.  | As of the date you me, the dam's   | 3. Oncok all that apply                               |            |
|     | Debtor 1 only  | Contingent   |   |            |
|     | Debtor 2 only  | ☐ Unliquidated   |   |            |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecure                                       | d alaim.  |            |
|     | ☐ At least one of the debtors and another  | Student loans  | d Claim.  |            |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?          | _  | ration agreement or divorce that you did not          |            |
|     | ■ No   | Debts to pension or profit-sharing   | g plans, and other similar debts                      |            |
|     | Yes  | Other. Specify Soil testing  | <u> </u>  |            |
| 4.1 | Augusta Cooperative Farm Bureau  | Last 4 digits of account number  | 6914  | \$635.69   |
|     | Nonpriority Creditor's Name<br>1205B /Richmond Road<br>Staunton, VA 24401              | When was the debt incurred?  | 07/31/2016  |            |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.                   | As of the date you file, the claim   | s: Check all that apply                               |            |
|     | ☐ Debtor 1 only  | ☐ Contingent   |   |            |
|     | Debtor 2 only  | ☐ Unliquidated   |   |            |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |
|     | $\square$ At least one of the debtors and another                                      | ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: |   |            |
|     | ☐ Check if this claim is for a community   | Student loans  |   |            |
|     | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                   | ration agreement or divorce that you did not          |            |
|     | ■ No   | Debts to pension or profit-sharing   | g plans, and other similar debts                      |            |
|     | Yes  | Other. Specify Building m  | aterials  |            |

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| Debte<br>Debte | or 1 lan R. Jackson Denise F. Jackson                                |  | Case number (if know)                         |             |
|----------------|--|--|---|-------------|
| 4.1<br>1       | Baker Distributing Company   | Last 4 digits of account number                              | 2227  | \$234.72    |
|                | Nonpriority Creditor's Name P O Box 409635 Atlanta, GA 30384         | When was the debt incurred?                                  | 07/31/2016                                    |             |
|                | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim                           | is: Check all that apply                      |             |
|                | Debtor 1 only  | ☐ Contingent   |   |             |
|                | Debtor 2 only  | ☐ Unliquidated   |   |             |
|                | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|                | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure                                 | d claim:                                      |             |
|                | ☐ Check if this claim is for a community                             | ☐ Student loans  |   |             |
|                | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |             |
|                | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |             |
|                | Yes  | Other. Specify Heat Pump                                     | material                                      |             |
| 4.1<br>2       | Bank of America  | Last 4 digits of account number                              | 8671  | \$17,141.40 |
|                | Nonpriority Creditor's Name P O Box 15019 Wilmington, DE 19886-5019  | When was the debt incurred?                                  | 01/1/2001                                     |             |
|                | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |             |
|                | Debtor 1 only  | ☐ Contingent   |   |             |
|                | Debtor 2 only  | ☐ Unliquidated   |   |             |
|                | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|                | At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                 | d claim:                                      |             |
|                | ☐ Check if this claim is for a community                             | ☐ Student loans  |   |             |
|                | debt Is the claim subject to offset?                                 |  | aration agreement or divorce that you did not |             |
|                | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |             |
|                | Yes  | Other. Specify Rewards to                                    | otal 1,126                                    |             |
| 4.1            | Blossman   | Last 4 digits of account number                              | 0329  | \$146.08    |
| <u> </u>       | Nonpriority Creditor's Name P O Box 750 Gordonsville, VA 22942       | When was the debt incurred?                                  | 01/1/2016                                     |             |
|                | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |             |
|                | Debtor 1 only  | ☐ Contingent   |   |             |
|                | Debtor 2 only  | ☐ Unliquidated   |   |             |
|                | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|                | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure                                 | d claim:                                      |             |
|                | ☐ Check if this claim is for a community debt                        | ☐ Student loans ☐ Obligations arising out of a sepa          | aration agreement or divorce that you did not |             |
|                | Is the claim subject to offset?                                      | report as priority claims                                    |   |             |
|                | ■ No   | Debts to pension or profit-sharing                           | ng plans, and other similar debts             |             |
|                | ☐ Yes  | ■ Other. Specify Service and                                 | d parts                                       |             |

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| Denise F. Jackson                                     | Case number (if know)   |            |
|---|---|------------|
| Blue Ridge Termite and Pest<br>Management             | Last 4 digits of account number   | \$2,113.24 |
| Nonpriority Creditor's Name P O Box 6549              | When was the debt incurred?   |            |
| Charlottesville, VA 22906                             | when was the dept incurred?   |            |
| Number Street City State Zlp Code                     | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                     |   |            |
| ☐ Debtor 1 only                                       | ☐ Contingent  |            |
| Debtor 2 only   | ☐ Unliquidated  |            |
| ■ Debtor 1 and Debtor 2 only                          | ☐ Disputed  |            |
| ☐ At least one of the debtors and another             | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community              | ☐ Student loans   |            |
| debt Is the claim subject to offset?                  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                             |            |
| Yes   | Other. Specify Termite treatment  |            |
| Brett Bickley   | Last 4 digits of account number   | Unknown    |
| Nonpriority Creditor's Name 1641 Mountain Laurel Road | When was the debt incurred? 4/26/16   |            |
| Palmyra, VA 22963  Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                     |   |            |
| ☐ Debtor 1 only                                       | Contingent  |            |
| Debtor 2 only   | Unliquidated  |            |
| Debtor 1 and Debtor 2 only                            | Disputed  |            |
| At least one of the debtors and another               | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community              | ☐ Student loans   |            |
| debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not                         |            |
| Is the claim subject to offset?                       | report as priority claims   |            |
| □ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  _ Construction contract with I&J   |            |
| Yes   | Other. Specify Homebuilders, LLC  |            |
| Buckingham Slate Co                                   | Last 4 digits of account number 7927  | \$338.39   |
| Nonpriority Creditor's Name                           |   |            |
| P O Box 8   | When was the debt incurred? 07/11/2016  |            |
| Arvonia, VA 23004  Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.                     | • • •   |            |
| Debtor 1 only   | ☐ Contingent  |            |
| ☐ Debtor 2 only                                       | ☐ Unliquidated  |            |
| ■ Debtor 1 and Debtor 2 only                          | ☐ Disputed  |            |
| ☐ At least one of the debtors and another             | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community              | ☐ Student loans   |            |
| debt<br>Is the claim subject to offset?               | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                     |            |
| □Yes  | ■ Other. Specify Crusher run  |            |
| 55  | - Other. Specify  |            |

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|          | 1 Ian R. Jackson<br>2 Denise F. Jackson   |  | Case number (if know)                           |              |
|----------|---|--|---|--------------|
| 4.1      | Builders 1st Source   | Last 4 digits of account number                              |   | \$241,199.17 |
|          | Nonpriority Creditor's Name<br>fka Pro-Build Company<br>51 Laurel Hill Road<br>Verona, VA 24482 | When was the debt incurred?                                  |   |              |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                             | As of the date you file, the claim                           | s: Check all that apply                         |              |
|          | ☐ Debtor 1 only   | ☐ Contingent   |   |              |
|          | ☐ Debtor 2 only   | ☐ Unliquidated   |   |              |
|          | ☐ Debtor 1 and Debtor 2 only  | Disputed   |   |              |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:  |              |
|          | ☐ Check if this claim is for a community debt   | Student loans  |   |              |
|          | Is the claim subject to offset?   | report as priority claims                                    | ration agreement or divorce that you did not    |              |
|          | ■ No  | Debts to pension or profit-sharin                            | g plans, and other similar debts                |              |
|          | Yes   | Other. Specify Building ma                                   | aterials  |              |
| 4.1<br>8 | Campbell Equipment Inc Nonpriority Creditor's Name  | Last 4 digits of account number                              | xxx   | \$1,817.09   |
|          | 16640 James Madison Hwy<br>Palmyra, VA 22963  | When was the debt incurred?                                  | 07/31/2016                                      |              |
|          | Number Street City State Zlp Code   | As of the date you file, the claim                           | s: Check all that apply                         |              |
|          | Who incurred the debt? Check one.   |  |   |              |
|          | ☐ Debtor 1 only   | ☐ Contingent   |   |              |
|          | Debtor 2 only   | ☐ Unliquidated   |   |              |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |              |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:  |              |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |   |              |
|          | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not    |              |
|          | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts                |              |
|          | Yes   | Other. Specify Vehicle tire                                  | S   |              |
| 4.1<br>9 | Capital One Nonpriority Creditor's Name   | Last 4 digits of account number                              | 0560  | \$21,632.10  |
|          | P O Box 71083<br>Charlotte, NC 28272-1083   | When was the debt incurred?                                  | Date Opened: 01/1/2001 Last<br>Used: 07/18/2016 |              |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                            | As of the date you file, the claim                           | s: Check all that apply                         |              |
|          | ☐ Debtor 1 only   | ☐ Contingent   |   |              |
|          | Debtor 2 only   | ☐ Unliquidated   |   |              |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |              |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:  |              |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |   |              |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not    |              |
|          | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts                |              |
|          | Yes   | Other. Specify   |   |              |

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| 1 Ian R. Jackson<br>2 Denise F. Jackson                                    | Case number (if know)   |         |
|--|---|---------|
| Carl Corbin  | Last 4 digits of account number   | Unkno   |
| Nonpriority Creditor's Name  | <del></del>   |         |
| PO Box 6341  | When was the debt incurred? 4/11/16   |         |
| Charlottesville, VA 22906  Number Street City State Zlp Code               | As of the date you file, the claim is: Check all that apply                     |         |
| Who incurred the debt? Check one.  | <u>_</u>  |         |
| ☐ Debtor 1 only  | Contingent  |         |
| ☐ Debtor 2 only  | Unliquidated  |         |
| ☐ Debtor 1 and Debtor 2 only   | Disputed  |         |
| At least one of the debtors and another                                    | Type of NONPRIORITY unsecured claim:  |         |
|  | ☐ Student loans   |         |
| ☐ Check if this claim is for a community debt                              | ☐ Obligations arising out of a separation agreement or divorce that you did not |         |
| Is the claim subject to offset?  | report as priority claims   |         |
| □ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts     |         |
| _  | Construction contract with I&J  |         |
| Yes  | Other. Specify Homebuilders, LLC  |         |
| Carpet Exress  | Last 4 digits of account number 9165  | \$2,226 |
| Nonpriority Creditor's Name  |   |         |
| 915 Market Street  | When was the debt incurred?   |         |
| Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply                     |         |
| Who incurred the debt? Check one.  |   |         |
| ☐ Debtor 1 only  | ☐ Contingent  |         |
| Debtor 2 only  | ☐ Unliquidated  |         |
| ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |         |
| ☐ At least one of the debtors and another                                  | Type of NONPRIORITY unsecured claim:  |         |
| _  | ☐ Student loans   |         |
| ☐ Check if this claim is for a community debt                              | ☐ Obligations arising out of a separation agreement or divorce that you did not |         |
| Is the claim subject to offset?  | report as priority claims   |         |
| ■ No   | Debts to pension or profit-sharing plans, and other similar debts               |         |
| Yes  | ■ Other. Specify Carpet supplies  |         |
|  |   |         |
| Cavalier Containers  | Last 4 digits of account number   | \$2,212 |
| Nonpriority Creditor's Name 2316 Highland Avenue Charlottesville, VA 22903 | When was the debt incurred?   |         |
| Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply                     |         |
| Who incurred the debt? Check one.  |   |         |
| Debtor 1 only  | ☐ Contingent  |         |
| Debtor 2 only  | ☐ Unliquidated  |         |
| ■ Debtor 1 and Debtor 2 only   | □ Disputed  |         |
| ☐ At least one of the debtors and another                                  | Type of NONPRIORITY unsecured claim:  |         |
| ☐ Check if this claim is for a community                                   | ☐ Student loans   |         |
| debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not |         |
| Is the claim subject to offset?  | report as priority claims   |         |
| ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts     |         |
| □ Yes  | ■ Other. Specify Container rentals  |         |

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| Denise F. Jackson  | Case number (if know)   |             |
|--|---|-------------|
| Central Virginia Electric Coop                                       | Last 4 digits of account number   | \$919.09    |
| Nonpriority Creditor's Name  |   | ,           |
| PO Box 2153  | When was the debt incurred?   |             |
| Dept. 1340   |   |             |
| Birmingham, AL 35287-1340  Number Street City State Zlp Code         | As of the date you file, the claim is: Check all that apply   |             |
| Who incurred the debt? Check one.                                    | The same same year may are common or consolic air man appropri  |             |
| ☐ Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | □ Unliquidated  |             |
| ■ Debtor 1 and Debtor 2 only   | □ Disputed  |             |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
|  | ☐ Student loans   |             |
| ☐ Check if this claim is for a community debt                        | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |
| Is the claim subject to offset?                                      | report as priority claims   |             |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| ☐ Yes  | Other. Specify  |             |
|  |   |             |
| Central Virginia Rentals Inc   | Last 4 digits of account number 2371  | \$855.36    |
| Nonpriority Creditor's Name  |   | <del></del> |
| 2482 Jefferson Hwy   | When was the debt incurred?   |             |
| Vaynesboro, VA 22980 Iumber Street City State Zlp Code               | As of the date were file the elements OL  |             |
| Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
| Debtor 1 only  | Поли  |             |
| Debtor 2 only  | Contingent  |             |
| <u>_</u>   | Unliquidated  |             |
| Debtor 1 and Debtor 2 only   | Disputed  |             |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
| uebt<br>Is the claim subject to offset?                              | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| ■ No   | □ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Yes  | ■ Other. Specify Machine Rental   |             |
|  |   |             |
| Central Wholesale Supply Corp  | Last 4 digits of account number J110  | \$348.89    |
| Nonpriority Creditor's Name P O Box 7208                             | When was the debt incurred?   |             |
| Norfolk, VA 23509  | This has the destinounce:   |             |
| Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply   |             |
| Who incurred the debt? Check one.                                    |   |             |
| Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | ☐ Unliquidated  |             |
| ■ Debtor 1 and Debtor 2 only   | Disputed  |             |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
| debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |
| Is the claim subject to offset?                                      | report as priority claims   |             |
| ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |             |
|  |   |             |

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|          | or 1 lan R. Jackson or 2 Denise F. Jackson                           | Case number (if know)  |             |
|----------|--|--|-------------|
| 4.2<br>6 | Certified Environmental Drilling                                     | Last 4 digits of account number  | \$21,434.00 |
|          | Nonpriority Creditor's Name P O Box 6538                             | When was the debt incurred?  |             |
|          | Charlottesville, VA 22906  | - Acceptable for a file of collection of the state of the |             |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |             |
|          | Debtor 1 only  |  |             |
|          |  | Contingent   |             |
|          | Debtor 2 only  | Unliquidated   |             |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|          | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:   |             |
|          | $\square$ Check if this claim is for a community                     | ☐ Student loans  |             |
|          | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |             |
|          | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | ■ Other. Specify Well Drilling   |             |
| 4.2<br>7 | Chambers Land Surveying  | Last 4 digits of account number 1028   | \$350.00    |
| 1        | Nonpriority Creditor's Name  | Last 4 digits of account flumber   | <del></del> |
|          | 253 Willow Dr  | When was the debt incurred?  |             |
|          | Keswick, VA 22947  | - As file has a file that the Old Hill and   |             |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |             |
|          | Debtor 1 only  |  |             |
|          | Debtor 2 only  | Contingent   |             |
|          |  | Unliquidated   |             |
|          | ■ Debtor 1 and Debtor 2 only   | Disputed   |             |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                             | Student loans  |             |
|          | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |             |
|          | No   | Debts to pension or profit-sharing plans, and other similar debts  |             |
|          |  |  |             |
|          | Yes  | ■ Other. Specify Physical survey   |             |
| 4.2<br>8 | Charlottesville Stone Company  | Last 4 digits of account number 9150   | \$1,952.26  |
|          | Nonpriority Creditor's Name  |  |             |
|          | P O Box 8425<br>Roanoke, VA 22936                                    | When was the debt incurred?  |             |
|          | Number Street City State ZIp Code                                    | As of the date you file, the claim is: Check all that apply  |             |
|          | Who incurred the debt? Check one.                                    | ,  |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |             |
|          | Debtor 2 only  | ☐ Unliquidated   |             |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans  |             |
|          | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not  |             |
|          | Is the claim subject to offset?                                      | report as priority claims  |             |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | ■ Other. Specify Stone purchased   |             |
|          |  |  |             |

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|          | 1 Ian R. Jackson<br>2 Denise F. Jackson  |  | Case number (if know)                           |             |
|----------|--|--|---|-------------|
| 4.2<br>9 | Citibank   | Last 4 digits of account number                              | 5795  | \$27,275.99 |
|          | Nonpriority Creditor's Name P O Box 9001037 Louisville, KY 40290-1037                      | When was the debt incurred?                                  | Date Opened: 01/1/2002 Last<br>Used: 07/27/2016 |             |
|          | Number Street City State ZIp Code  Who incurred the debt? Check one.                       | As of the date you file, the claim                           | is: Check all that apply                        |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |   |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated   |   |             |
|          | ☐ Debtor 1 and Debtor 2 only   | Disputed   |   |             |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:  |             |
|          | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sena          | ration agreement or divorce that you did not    |             |
|          | Is the claim subject to offset?  | report as priority claims                                    | nation agreement of arverse that you did not    |             |
|          | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts                |             |
|          | Yes  | Other. Specify Credit Card                                   | I Purchases                                     |             |
| 4.3      | City of Waynesboro   | Last 4 digits of account number                              | 1926  | \$891.94    |
|          | Nonpriority Creditor's Name 503 W Main Street Ste 105                                      | When was the debt incurred?                                  | 10/3/2014                                       |             |
|          | Waynesboro, VA 22980  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                        |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |   |             |
|          | Debtor 2 only  | ☐ Unliquidated   |   |             |
|          | ■ Debtor 1 and Debtor 2 only   | ■ Disputed   |   |             |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:  |             |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |   |             |
|          | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not   |             |
|          | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts                |             |
|          | Yes  | Other. Specify Temporary                                     | water kill at 1200 B Street                     |             |
| 4.3      | Comcast Communications  Nonpriority Creditor's Name  | Last 4 digits of account number                              | 0012  | \$447.78    |
|          | PO Box 3006<br>Southeastern, PA 19398  | When was the debt incurred?                                  |   |             |
|          | Number Street City State Zlp Code  | As of the date you file, the claim i                         | is: Check all that apply                        |             |
|          | Who incurred the debt? Check one.  |  |   |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |   |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated   |   |             |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:  |             |
|          | ☐ Check if this claim is for a community debt  |  | ration agreement or divorce that you did not    |             |
|          | Is the claim subject to offset?  | report as priority claims                                    |   |             |
|          | No No  | Debts to pension or profit-sharing                           |   |             |
|          | Yes  | Other. Specify Internet ser                                  | rvice   |             |

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| Debtor 2 Denise F. Jackson |   | Case number (if know)   |            |  |
|----------------------------|---|---|------------|--|
| 4.3                        | Commonwealth Bldg Materials, Inc.   | Last 4 digits of account number 4900  | \$9,230.39 |  |
|                            | Nonpriority Creditor's Name c/o Cameron/McEvoy, PLLC 4100 Monument Corner Dr., #420 Fairfax, VA 22030 | When was the debt incurred?   |            |  |
|                            | Number Street City State Zlp Code Who incurred the debt? Check one.                                   | As of the date you file, the claim is: Check all that apply   |            |  |
|                            | Debtor 1 only   | ☐ Contingent  |            |  |
|                            | Debtor 2 only   | ☐ Unliquidated  |            |  |
|                            | ☐ Debtor 1 and Debtor 2 only  | □ Disputed  |            |  |
|                            | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |
|                            | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |
|                            | debt Is the claim subject to offset?  | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |
|                            | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |  |
|                            | Yes   | Other. Specify Construction materials   |            |  |
| 4.3                        | Concrete Pipes and Precast, LLC   | Last 4 digits of account number   | Unknown    |  |
|                            | Nonpriority Creditor's Name 210 Stone Spring Road Harrisonburg, VA 22801                              | When was the debt incurred?   |            |  |
| -                          | Number Street City State Zlp Code Who incurred the debt? Check one.                                   | As of the date you file, the claim is: Check all that apply   |            |  |
|                            | ☐ Debtor 1 only   | ☐ Contingent  |            |  |
|                            | ☐ Debtor 2 only   | ☐ Unliquidated  |            |  |
|                            | ■ Debtor 1 and Debtor 2 only  | Disputed  |            |  |
|                            | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |
|                            | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |
|                            | debt Is the claim subject to offset?  | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |
|                            | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |            |  |
|                            | Yes   | Other. Specify  |            |  |
| 4.3                        | Davenport Insulation  | Last 4 digits of account number 5706  | \$6,692.20 |  |
|                            | Nonpriority Creditor's Name<br>6471 S. Valley Pike<br>Mt. Crawford, VA 22841                          | When was the debt incurred?   |            |  |
| -                          | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |            |  |
|                            | Who incurred the debt? Check one.   | _   |            |  |
|                            | Debtor 1 only   | Contingent  |            |  |
|                            | Debtor 2 only   | Unliquidated  |            |  |
|                            | ■ Debtor 1 and Debtor 2 only  | Disputed  |            |  |
|                            | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |
|                            | ☐ Check if this claim is for a community debt Is the claim subject to offset?                         | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not                   |            |  |
|                            | _   | report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                      |            |  |
|                            | ■ No  |   |            |  |
|                            | Yes   | Other. Specify Insulation   |            |  |

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson |  | Case number (if know)   |             |  |
|--|--|---|-------------|--|
| 4.3<br>5   | Erie Indemnity Co.   | Last 4 digits of account number ADL   | \$15,654.50 |  |
|  | Nonpriority Creditor's Name<br>c/o Marsden & Seledee, LLC<br>1 N. Charles St, Suite 2300<br>Baltimore, MD 21201-3740 | When was the debt incurred?   |             |  |
|  | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply   |             |  |
|  | ■ Debtor 1 only □ Debtor 2 only  | ☐ Contingent ☐ Unliquidated   |             |  |
|  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |             |  |
|  | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |  |
|  | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |             |  |
|  | Yes  | Other. Specify Insurance  |             |  |
| 4.3<br>6   | Federal Loan  Nonpriority Creditor's Name  | Last 4 digits of account number 6653  | \$13,630.88 |  |
|  | US Department of Education P O Box 530210 Atlanta, GA 30353-0210   | When was the debt incurred?   |             |  |
|  | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply   |             |  |
|  | ☐ Debtor 1 only  | ☐ Contingent  |             |  |
|  | ☐ Debtor 2 only  | ☐ Unliquidated  |             |  |
|  | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |  |
|  | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |             |  |
|  | ☐ Check if this claim is for a community debt  | ■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not                           |             |  |
|  | Is the claim subject to offset?  | report as priority claims   |             |  |
|  | ■ No □ Yes   | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify                                      |             |  |
| 4.3  | Ferguson Enterprises   | Last 4 digits of account number 1323  | \$14,442.52 |  |
|  | Nonpriority Creditor's Name 505 Garrett Street Charlottesville, VA 22902   | When was the debt incurred?   |             |  |
|  | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |             |  |
|  | ☐ Debtor 1 only  | ☐ Contingent  |             |  |
|  | Debtor 2 only  | ☐ Unliquidated  |             |  |
|  | ☐ Debtor 1 and Debtor 2 only   | □ Disputed  |             |  |
|  | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |             |  |
|  | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not                           |             |  |
|  | Is the claim subject to offset?  | report as priority claims   |             |  |
|  | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts   |             |  |
|  | Yes  | Other. Specify Plumbing supplies  |             |  |

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|          | or 1 Ian R. Jackson or 2 Denise F. Jackson  | Case number (if know)  |            |
|----------|---|--|------------|
| 4.3<br>8 | Forest Pro Inc.   | Last 4 digits of account number  | \$155.49   |
|          | Nonpriority Creditor's Name<br>8473 West River Rd   | When was the debt incurred? 06/20/2016   |            |
|          | Scottsville, VA 24590   |  |            |
|          | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply  |            |
|          | Who incurred the debt? Check one.   |  |            |
|          | Debtor 1 only   | ☐ Contingent   |            |
|          | ☐ Debtor 2 only   | ☐ Unliquidated   |            |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|          | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |            |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |            |
|          | debt Is the claim subject to offset?  | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|          | ■ No  | Debts to pension or profit-sharing plans, and other similar debts  |            |
|          | Yes   | Other. Specify Machine parts   |            |
| 4.3      | Foster Fuels, Inc.  | Last 4 digits of account number 1626   | \$9,003.11 |
| 9        | Nonpriority Creditor's Name   |  | 40,000     |
|          | PO Box 190  | When was the debt incurred?  |            |
|          | Brookneal, VA 24528   |  |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply  |            |
|          | Debtor 1 only   |  |            |
|          | ′   | Contingent   |            |
|          | ☐ Debtor 2 only   | Unliquidated   |            |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |            |
|          | $\square$ Check if this claim is for a community  | Student loans  |            |
|          | debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not                            |            |
|          | <u> </u>  | report as priority claims  |            |
|          | ■ No  | Debts to pension or profit-sharing plans, and other similar debts  |            |
|          | Yes   | ■ Other. Specify <b>Fuel</b>   |            |
| 4.4<br>0 | Gooch Engineering and Testing   | Last 4 digits of account number  | \$925.00   |
|          | Nonpriority Creditor's Name 1821 Broadway Street  | When was the debt incurred?  |            |
|          | Charlottesville, VA 22902  Number Street City State Zlp Code  | As of the data was file the alaim is O   |            |
|          | Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply  |            |
|          | Debtor 1 only   | Пол  |            |
|          | Debtor 2 only   | ☐ Contingent   |            |
|          | <u> </u>  | ☐ Unliquidated   |            |
|          | ■ Debtor 1 and Debtor 2 only □ Disputed  Time of NONDRICELY Processing |  |            |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  ☐ Student loans  |            |
|          | ☐ Check if this claim is for a community debt   | _  |            |
|          | Is the claim subject to offset?   | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|          | ■ No  | □ Debts to pension or profit-sharing plans, and other similar debts                                      |            |
|          | □ Yes   | ■ Other. Specify Engineering   |            |
|          | <b>□</b> 169  | Other. Specify     This incoming   |            |

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|     | r 1 Ian R. Jackson r 2 Denise F. Jackson                             | Case number (if know)  |  |
|-----|--|--|--|
| 4.4 | Home Depot   | Last 4 digits of account number 3458   | \$594.49                                       |
|     | Nonpriority Creditor's Name P O box 790420                           | When was the debt incurred?  |  |
|     | St Louis, MO 63179   | - Acceptate the conflict and the state of th |  |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |  |
|     | Debtor 1 only  |  |  |
|     | Debtor 2 only  | ☐ Contingent   |  |
|     | <u> </u>   | ☐ Unliquidated   |  |
|     | ■ Debtor 1 and Debtor 2 only   | Disputed   |  |
|     | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:   |  |
|     | ☐ Check if this claim is for a community debt                        | ☐ Student loans  |  |
|     | Is the claim subject to offset?                                      | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |  |
|     | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |  |
|     | Yes  | ■ Other. Specify Building supplies   |  |
| 4.4 | Hoover Penrod PLC  | Last 4 digits of account number 000M   | \$1,455.00                                     |
|     | Nonpriority Creditor's Name  |  | <b>— • • • • • • • • • • • • • • • • • • •</b> |
|     | 342 S. Main St.  | When was the debt incurred? 8/16   |  |
|     | Harrisonburg, VA 22801  Number Street City State Zlp Code            | As of the date you file, the claim is: Check all that apply  |  |
|     | Who incurred the debt? Check one.                                    | As of the date you file, the claim is. Offect all that apply   |  |
|     | Debtor 1 only  | ☐ Contingent   |  |
|     | Debtor 2 only  | ☐ Unliquidated   |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |
|     | <u> </u>   | Type of NONPRIORITY unsecured claim:   |  |
|     | At least one of the debtors and another                              | □ Student loans  |  |
|     | ☐ Check if this claim is for a community debt                        | ☐ Obligations arising out of a separation agreement or divorce that you did not  |  |
|     | Is the claim subject to offset?                                      | report as priority claims  |  |
|     | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |  |
|     | Yes  | Other. Specify Legal services  |  |
| 4.4 | J & B Nixon Inc  |  | \$5,186.27                                     |
| 3   | Nonpriority Creditor's Name  | Last 4 digits of account number  | \$3,100.2 <i>1</i>                             |
|     | 5925 Anderson Hwy<br>Powhatan, VA 23139                              | When was the debt incurred?  |  |
|     | Number Street City State Zlp Code                                    | As of the date you file, the claim is: Check all that apply  |  |
|     | Who incurred the debt? Check one.                                    |  |  |
|     | Debtor 1 only  | ☐ Contingent   |  |
|     | Debtor 2 only  | ☐ Unliquidated   |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |
|     | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:   |  |
|     | ☐ Check if this claim is for a community                             | ☐ Student loans  |  |
|     | debt   | Obligations arising out of a separation agreement or divorce that you did not  |  |
|     | Is the claim subject to offset?                                      | report as priority claims  |  |
|     | ■ No   | Debts to pension or profit-sharing plans, and other similar debts  |  |
|     | Yes  | ■ Other. Specify Septic supplies   |  |

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|          | or 2 Denise F. Jackson   | Case number (if know)  |              |
|----------|--|--|--------------|
| 4.4      | Jackson Management LLC   | Last 4 digits of account number  | \$292,400.00 |
|          | Nonpriority Creditor's Name  | When was the debt incurred?  |              |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply  |              |
|          | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|          | ■ No<br>□ Yes  | Debts to pension or profit-sharing plans, and other similar debts  |              |
|          | ⊔ Yes  | ■ Other. Specify Construction Loan   |              |
| 4.4<br>5 | Jeff Dalton  Nonpriority Creditor's Name   | Last 4 digits of account number  | \$7,295.00   |
|          | 520 Greenfield Terrace Charlottesville, VA 22901 Number Street City State Zlp Code   | When was the debt incurred?  As of the date you file, the claim is: Check all that apply   |              |
|          | Who incurred the debt? Check one.  | The state year me, and statement of book all that apply  |              |
|          | Debtor 1 only  | ☐ Contingent   |              |
|          | Debtor 2 only  | ☐ Unliquidated   |              |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |              |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |              |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |              |
|          | debt Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |              |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts  |              |
|          | Yes  | ■ Other. Specify Accounting services   |              |
| 4.4      | Jiffy Lube   | Last 4 digits of account number  | \$1,019.81   |
|          | Nonpriority Creditor's Name P O box 620130   | When was the debt incurred?  |              |
|          | Middleton, WI 53562  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply  |              |
|          | Debtor 1 only  | ☐ Contingent   |              |
|          | Debtor 2 only  | ☐ Unliquidated   |              |
|          | ■ Debtor 1 and Debtor 2 only   | ·  |              |
|          | ☐ At least one of the debtors and another  | ☐ Disputed  Type of NONPRIORITY unsecured claim:   |              |
|          |  | Student loans  |              |
|          | ☐ Check if this claim is for a community debt  Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |              |
|          | No   | □ Debts to pension or profit-sharing plans, and other similar debts  |              |
|          | ☐ Yes  | Other. Specify  Vehicle service  |              |
|          | 55   | - Other, Specify   |              |

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|          | ebtor 1 Ian R. Jackson ebtor 2 Denise F. Jackson Case number (if know) |   |            |
|----------|--|---|------------|
| 1.4      | John Dezio   | Last 4 digits of account number   | \$8,975.00 |
| <b>7</b> | Nonpriority Creditor's Name  |   | <b>,</b>   |
|          | 2350 Commonwealth Drive<br>Charlottesville, VA 22901                   | When was the debt incurred?   |            |
|          | Number Street City State Zlp Code                                      | As of the date you file, the claim is: Check all that apply   |            |
|          | Who incurred the debt? Check one.                                      |   |            |
|          | ☐ Debtor 1 only  | ☐ Contingent  |            |
|          | Debtor 2 only  | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |            |
|          | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |            |
|          |  | ☐ Student loans   |            |
|          | ☐ Check if this claim is for a community debt                          | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
|          | Is the claim subject to offset?  | report as priority claims   |            |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |            |
|          | ☐ Yes  | ■ Other. Specify Legal fees   |            |
| 1.4      | Johnson & Johnson Preferred Fin,<br>Inc                                | Last 4 digits of account number 0619  | \$2,492.84 |
|          | Nonpriority Creditor's Name P O Box 26009                              | When was the debt incurred?   |            |
|          | Greensboro, NC 27420  Number Street City State Zlp Code                | As of the date you file, the claim is: Check all that apply   |            |
|          | Who incurred the debt? Check one.                                      |   |            |
|          | ☐ Debtor 1 only  | ☐ Contingent  |            |
|          | Debtor 2 only  | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |            |
|          | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |            |
|          | ☐ Check if this claim is for a community                               | ☐ Student loans   |            |
|          | debt Is the claim subject to offset?                                   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |            |
|          | Yes  | ■ Other. Specify Insurance for I & J Home Builders  |            |
| .4       |  |   |            |
|          | Jones Automotive   | Last 4 digits of account number   | \$2,920.92 |
|          | Nonpriority Creditor's Name P O Box 910 Troy, VA 22974                 | When was the debt incurred? 07/31/2016  |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|          | Debtor 1 only  | Пол   |            |
|          | Debtor 2 only  | ☐ Contingent  |            |
|          | •  | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only   | Disputed  |            |
|          | At least one of the debtors and another                                | Type of NONPRIORITY unsecured claim:  |            |
|          | ☐ Check if this claim is for a community debt                          | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |            |
|          | Is the claim subject to offset?  | report as priority claims   |            |
|          | No   | Debts to pension or profit-sharing plans, and other similar debts   |            |
|          | ☐ Yes  | ■ Other. Specify Vehicle repairs  |            |

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|          | or 1 lan R. Jackson or 2 Denise F. Jackson                               | Case number (if know)  |             |
|----------|--|--|-------------|
| 4.5<br>0 | Kelvin S. Covington  | Last 4 digits of account number  | \$40,000.00 |
|          | Nonpriority Creditor's Name 773 Rivanna Woods Drive Fork Union, VA 23055 | When was the debt incurred?  |             |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.     | As of the date you file, the claim is: Check all that apply  |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |             |
|          | Debtor 2 only  | ☐ Unliquidated   |             |
|          | ■ Debtor 1 and Debtor 2 only   | Disputed   |             |
|          | $\square$ At least one of the debtors and another                        | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                                 | ☐ Student loans  |             |
|          | debt Is the claim subject to offset?                                     | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims                 |             |
|          | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | ■ Other. Specify   |             |
|          |  |  |             |
| 4.5<br>1 | Lewis M. Hudson  | Last 4 digits of account number XXX  | \$2,897.50  |
|          | Nonpriority Creditor's Name P O Box 146 Waynesboro, VA 22980             | When was the debt incurred? 05/31/2016   |             |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.      | As of the date you file, the claim is: Check all that apply  |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated   |             |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|          | ☐ At least one of the debtors and another                                | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                                 | ☐ Student loans  |             |
|          | debt Is the claim subject to offset?                                     | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |             |
|          | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | ■ Other. Specify Crane rental  |             |
| 4.5<br>2 | Lowe's   | Last 4 digits of account number 0692   | \$4,238.73  |
|          | Nonpriority Creditor's Name P O Box 530970 Atlanta, GA 30353             | When was the debt incurred?  |             |
|          | Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply  |             |
|          | Who incurred the debt? Check one.  |  |             |
|          | ☐ Debtor 1 only  | ☐ Contingent   |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated   |             |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |
|          | At least one of the debtors and another                                  | Type of NONPRIORITY unsecured claim:   |             |
|          | ☐ Check if this claim is for a community                                 | ☐ Student loans  |             |
|          | debt Is the claim subject to offset?                                     | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |             |
|          | Yes  | ■ Other. Specify Building supplies   |             |

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|          | r 1 lan R. Jackson r 2 Denise F. Jackson                             | Case number (if know)   |             |
|----------|--|---|-------------|
| 4.5      | Lowe's LAR   | Last 4 digits of account number 1338  | \$42,527.35 |
|          | Nonpriority Creditor's Name P O Box 530970                           | When was the debt incurred?   |             |
|          | Atlanta, GA 30353  Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.  ☐ Debtor 1 only                   | ☐ Contingent  |             |
|          | Debtor 2 only  | □ Unliquidated  |             |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
|          | debt<br>Is the claim subject to offset?                              | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No   | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                                    |             |
|          | Yes  | ■ Other. Specify Building supplies  |             |
| 4.5      | Luck Stone   | Last 4 digits of account number 3057  | \$38,692.85 |
|          | Nonpriority Creditor's Name P O Box 29871 Pichmand, VA 33343         | When was the debt incurred?   |             |
|          | Richmond, VA 23242  Number Street City State Zlp Code                | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.                                    | ,   |             |
|          | ☐ Debtor 1 only  | ☐ Contingent  |             |
|          | Debtor 2 only  | ☐ Unliquidated  |             |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
|          | debt<br>Is the claim subject to offset?                              | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |             |
|          | Yes  | ■ Other. Specify Stone supplis  |             |
| 4.5<br>5 | Matt Gooch Consulting Engineer                                       | Last 4 digits of account number XXX   | \$955.25    |
|          | Nonpriority Creditor's Name 707 Oliver Creek Rd Troy, VA 22974       | When was the debt incurred? 06/30/2016  |             |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
|          | Debtor 1 only  | ☐ Contingent  |             |
|          | Debtor 2 only  | ☐ Unliquidated  |             |
|          | ■ Debtor 1 and Debtor 2 only   | □ Disputed  |             |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
|          | debt<br>Is the claim subject to offset?                              | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|          | ☐ Yes  | ■ Other. Specify Engineering inspection   |             |
|          |  |   |             |

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|          | or 1 Ian R. Jackson or 2 Denise F. Jackson                                    | Case number (if know)   |            |
|----------|---|---|------------|
| 4.5<br>6 | May Supply  | Last 4 digits of account number JH01  | \$9,854.74 |
|          | Nonpriority Creditor's Name<br>1775 Erickson Ave<br>Harrisonburg, VA 22801    | When was the debt incurred?   |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim is: Check all that apply   |            |
|          | Debtor 1 only   | ☐ Contingent  |            |
|          | ☐ Debtor 2 only   | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|          | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |            |
|          | $\square$ Check if this claim is for a community                              | ☐ Student loans   |            |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|          | No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |
|          | Yes   | ■ Other. Specify Plumbing materials   |            |
| 4.5<br>7 | Noland Company  | Last 4 digits of account number 9856  | \$8,790.08 |
|          | Nonpriority Creditor's Name 307 Ridge Street Charlotesville, VA 22902         | When was the debt incurred?   |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim is: Check all that apply   |            |
|          | ☐ Debtor 1 only   | ☐ Contingent  |            |
|          | Debtor 2 only   | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|          | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |            |
|          | ☐ Check if this claim is for a community                                      | Student loans   |            |
|          | debt Is the claim subject to offset? —  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |            |
|          | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |
|          | Yes   | ■ Other. Specify Plumbing materials   |            |
| 4.5<br>8 | P J Networks  | Last 4 digits of account number 1065  | \$562.50   |
|          | Nonpriority Creditor's Name 2340 Commonwealth Drive Charlottesville, VA 22901 | When was the debt incurred? 07/7/2016   |            |
|          | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |            |
|          | Who incurred the debt? Check one.   |   |            |
|          | Debtor 1 only   | ☐ Contingent  |            |
|          | Debtor 2 only   | ☐ Unliquidated  |            |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
|          | $\square$ At least one of the debtors and another                             | Type of NONPRIORITY unsecured claim:  |            |
|          | $\square$ Check if this claim is for a community debt                         | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |            |
|          | Is the claim subject to offset?   | report as priority claims   |            |
|          | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|          | ☐ Yes   | ■ Other. Specify Computer services  |            |

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|          | tor 2 Denise F. Jackson  | Case number (if know)   |             |
|----------|--|---|-------------|
| 4.5<br>9 | Quinn Beversluis   | Last 4 digits of account number   | \$54,729.00 |
| <u> </u> | Nonpriority Creditor's Name 5544 Three Notch Rd  | When was the debt incurred?   |             |
|          | Louisa, VA 23093  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
|          | Debtor 1 only  | ☐ Contingent  |             |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |             |
|          | ■ Debtor 1 and Debtor 2 only   | ■ Disputed  |             |
|          | $\square$ At least one of the debtors and another                                      | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community   | ☐ Student loans   |             |
|          | debt Is the claim subject to offset?   | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|          | Yes  | ■ Other. Specify Commissions  |             |
| 4.6<br>0 | Real Wood Floors   | Last 4 digits of account number   | Unknown     |
|          | Nonpriority Creditor's Name 355 S. Highway 63 West Plains, MO 65775                    | When was the debt incurred?   |             |
|          | Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.  |   |             |
|          | Debtor 1 only  | Contingent  |             |
|          | Debtor 2 only  | Unliquidated  |             |
|          | Debtor 1 and Debtor 2 only   | Disputed  |             |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community debt  | Student loans   |             |
|          | Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |             |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |             |
|          | Yes  | Other. Specify Flooring   |             |
| 4.6      | Rockydale Quaries Corp.  |   | \$1,923.41  |
| 1        | Nonpriority Creditor's Name  | Last 4 digits of account number   | Ψ1,323.71   |
|          | PO Box 8425  | When was the debt incurred?   |             |
|          | Roanoke, VA 24014  Number Street City State Zlp Code                                   | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.  | As of the date you me, the claim is. Check all that apply   |             |
|          | ☐ Debtor 1 only  | ☐ Contingent  |             |
|          | Debtor 2 only  | ☐ Unliquidated  |             |
|          | ☐ Debtor 1 and Debtor 2 only   | Disputed  |             |
|          | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community   | ☐ Student loans   |             |
|          | debt Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims           |             |
|          | No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|          | Yes  | ■ Other. Specify Building supplies  |             |
|          |  |   |             |

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|          | Denise F. Jackson   |   | Case number (if kn                         | now)                               |             |
|----------|---|---|--|------------------------------------|-------------|
| 4.6      | Sam's Mastercard  | Last 4 digits of account number   | 4213                                       |                                    | \$4,149.79  |
|          | Nonpriority Creditor's Name P O Box 960013                          | When was the debt incurred?   | Date Opened: 09/20/2016                    | Last Used:                         |             |
|          | Orlando, FL 32896-0013  |   |  |                                    |             |
|          | Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim  | is: Check all that appl                    | у                                  |             |
|          | ☐ Debtor 1 only   | ☐ Contingent  |  |                                    |             |
|          | ☐ Debtor 2 only   | ☐ Unliquidated  |  |                                    |             |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |                                    |             |
|          | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecure  | d claim:                                   |                                    |             |
|          | ☐ Check if this claim is for a community                            | Student loans   |  |                                    |             |
|          | debt Is the claim subject to offset?                                | ☐ Obligations arising out of a separeport as priority claims                  | aration agreement or d                     | livorce that you did not           |             |
|          | No  | Debts to pension or profit-sharing  | ng plans, and other sin                    | nilar debts                        |             |
|          | Yes   | ■ Other. Specify Sam's rewa   | ards \$183.02                              |                                    |             |
| 4.6      | Scotty Sipe   | Last 4 digits of account number   |  | _                                  | \$32,480.00 |
|          | Nonpriority Creditor's Name PO Box 56 Crimora, VA 24431             | When was the debt incurred?   |  |                                    |             |
|          | Number Street City State Zlp Code                                   | As of the date you file, the claim  | is: Check all that appl                    | у                                  |             |
|          | Who incurred the debt? Check one.                                   |   |  |                                    |             |
|          | Debtor 1 only   | ☐ Contingent  |  |                                    |             |
|          | Debtor 2 only   | ☐ Unliquidated  |  |                                    |             |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |                                    |             |
|          | At least one of the debtors and another                             | Type of NONPRIORITY unsecure  | d claim:                                   |                                    |             |
|          | Check if this claim is for a community                              | ☐ Student loans   |  |                                    |             |
|          | debt Is the claim subject to offset?                                | Obligations arising out of a separeport as priority claims                    | aration agreement or d                     | divorce that you did not           |             |
|          | No  | Debts to pension or profit-sharing  | ng plans, and other sin                    | nilar debts                        |             |
|          | ☐ Yes   |   | t of the compan<br>nd when we clo<br>,480) | y and he put<br>sed this was still |             |
| 4.6      | Shenandoah Valley Water & Coffee<br>Co                              | Last 4 digits of account number   | 1020                                       |                                    | \$102.67    |
| <u>.</u> | Nonpriority Creditor's Name   | Last 4 digits of account number   |  | _                                  | <del></del> |
|          | P O Box 2339<br>Staunton, VA 24402                                  | When was the debt incurred?   | 07/31/2016                                 |                                    |             |
|          | Number Street City State ZIp Code                                   | As of the date you file, the claim  | is: Check all that appl                    | у                                  |             |
|          | Who incurred the debt? Check one.                                   | _   |  |                                    |             |
|          | Debtor 1 only   | ☐ Contingent  |  |                                    |             |
|          | Debtor 2 only   | Unliquidated  |  |                                    |             |
|          | ■ Debtor 1 and Debtor 2 only  | Disputed  |  |                                    |             |
|          | At least one of the debtors and another                             | Type of NONPRIORITY unsecure  | d claim:                                   |                                    |             |
|          | ☐ Check if this claim is for a community debt                       | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> | aration agreement or d                     | divorce that you did not           |             |
|          | Is the claim subject to offset?                                     | report as priority claims   | · ·  | •                                  |             |
|          | No  | Debts to pension or profit-sharing  |  |                                    |             |
|          | ☐ Yes   | Other. Specify Water and  | equipment renta                            |                                    |             |

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|          | r 1 Ian R. Jackson r 2 Denise F. Jackson                                  | Case number (if know)   |                 |
|----------|---|---|-----------------|
| 4.6<br>5 | Sherwin Williams  | Last 4 digits of account number 0166  | \$5,214.18      |
|          | Nonpriority Creditor's Name 2319 W. Main Street                           | When was the debt incurred?   |                 |
|          | Waynesboro, VA 22980  Number Street City State Zlp Code                   | As of the date you file, the claim is: Check all that apply   |                 |
|          | Who incurred the debt? Check one.   |   |                 |
|          | Debtor 1 only   | Contingent  |                 |
|          | Debtor 2 only   | Unliquidated  |                 |
|          | ■ Debtor 1 and Debtor 2 only  | Disputed  |                 |
|          | At least one of the debtors and another                                   | Type of NONPRIORITY unsecured claim:  |                 |
|          | ☐ Check if this claim is for a community debt                             | ☐ Student loans   |                 |
|          | ls the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                 |
|          | No  | Debts to pension or profit-sharing plans, and other similar debts   |                 |
|          | Yes   | Other. Specify Paint supplies   |                 |
| 4.6<br>6 | Skyline Brick LLC   | Last 4 digits of account number 2003  | \$13,732.46     |
|          | Nonpriority Creditor's Name 3900 Seminole Trail Charlottesville, VA 22911 | When was the debt incurred?   |                 |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.      | As of the date you file, the claim is: Check all that apply   |                 |
|          | ☐ Debtor 1 only   | ☐ Contingent  |                 |
|          | Debtor 2 only   | □ Unliquidated  |                 |
|          | ■ Debtor 1 and Debtor 2 only  | □ Disputed  |                 |
|          | ☐ At least one of the debtors and another                                 | Type of NONPRIORITY unsecured claim:  |                 |
|          | ☐ Check if this claim is for a community                                  | ☐ Student loans   |                 |
|          | debt Is the claim subject to offset?                                      | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                 |
|          | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                 |
|          | Yes   | ■ Other. Specify Building blocks  |                 |
| 4.6      | Southern Freight Lines  | Last 4 digits of account number XXX   | \$190.00        |
| 7        | Nonpriority Creditor's Name   |   | <b>V</b> 100100 |
|          | P O Box 1691  | When was the debt incurred? 12/2/2015   |                 |
|          | Columbia, SC 29202  Number Street City State Zlp Code                     | As of the date you file, the claim is: Check all that apply   |                 |
|          | Who incurred the debt? Check one.   | The of the date year me, the stant to officer all that appry  |                 |
|          | ☐ Debtor 1 only   | ☐ Contingent  |                 |
|          | Debtor 2 only   | ☐ Unliquidated  |                 |
|          | ■ Debtor 1 and Debtor 2 only  | □ Disputed  |                 |
|          | ☐ At least one of the debtors and another                                 | Type of NONPRIORITY unsecured claim:  |                 |
|          | ☐ Check if this claim is for a community                                  | ☐ Student loans   |                 |
|          | debt Is the claim subject to offset?                                      | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                 |
|          | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |                 |
|          | ☐ Yes   | ■ Other. Specify Shipping   |                 |

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|          | or 1 lan R. Jackson or 2 Denise F. Jackson  | Case number (if know)   |                            |
|----------|---|---|----------------------------|
| 4.6      | Stanley Land Surveys  | Last 4 digits of account number   | \$1,451.25                 |
| 8        | Nonpriority Creditor's Name  106 Crofton Plaza - Suite 8                                | When was the debt incurred?   | Ψ1,431.23                  |
|          | Palmyra, VA 22963  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |                            |
|          | Debtor 1 only   | ☐ Contingent  |                            |
|          | Debtor 2 only   | ☐ Unliquidated  |                            |
|          | ■ Debtor 1 and Debtor 2 only  | □ Disputed  |                            |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |                            |
|          | ☐ Check if this claim is for a community debt   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not           |                            |
|          | Is the claim subject to offset?   | report as priority claims   |                            |
|          | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                            |
|          | Yes   | ■ Other. Specify Land surveying   |                            |
| 4.6<br>9 | Sunoco Suntrak  | Last 4 digits of account number 1844  | \$12,818.16                |
|          | Nonpriority Creditor's Name  Wex Bank   | When was the debt incurred?   |                            |
|          | P O Box 4337  |   |                            |
|          | Carol Stream, IL 60197  |   |                            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                    | As of the date you file, the claim is: Check all that apply   |                            |
|          | Debtor 1 only   |   |                            |
|          | Debtor 2 only   | ☐ Contingent  |                            |
|          |   | ☐ Unliquidated  |                            |
|          | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |                            |
|          | At least one of the debtors and another   | Student loans   |                            |
|          | ☐ Check if this claim is for a community debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |                            |
|          | Is the claim subject to offset?   | report as priority claims   |                            |
|          | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                            |
|          | Yes   | ■ Other. Specify Gasoline   |                            |
| 4.7      |   | 4004  | <b>* * * * * * * * * *</b> |
| 0        | Suntrust Bank Nonpriority Creditor's Name   | Last 4 digits of account number 1024  | \$18,297.44                |
|          | American Education Services Harrisburg, PA 17130-0001                                   | When was the debt incurred?   |                            |
|          | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |                            |
|          | Who incurred the debt? Check one.   |   |                            |
|          | Debtor 1 only   | Contingent  |                            |
|          | Debtor 2 only   | Unliquidated  |                            |
|          | Debtor 1 and Debtor 2 only  | Disputed  |                            |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |                            |
|          | Check if this claim is for a community  | Student loans   |                            |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                            |
|          | No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |                            |
|          | ☐ Yes   |   |                            |
|          | ⊔ res   | Other. Specify  |                            |

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|          | r 1 Ian R. Jackson r 2 Denise F. Jackson      | Case number (if know)   |             |
|----------|---|---|-------------|
| 4.7      | Time Disposal                                 | Last 4 digits of account number   | \$103.00    |
| 1        | Nonpriority Creditor's Name                   |   | 4.00.00     |
|          | P.O. Box 7174                                 | When was the debt incurred?   |             |
|          | Charlottesville, VA 22906                     |   |             |
|          | Number Street City State Zlp Code             | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.             |   |             |
|          | Debtor 1 only                                 | ☐ Contingent  |             |
|          | ☐ Debtor 2 only                               | ☐ Unliquidated  |             |
|          | ■ Debtor 1 and Debtor 2 only                  | ☐ Disputed  |             |
|          | ☐ At least one of the debtors and another     | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ Check if this claim is for a community      | ☐ Student loans   |             |
|          | debt Is the claim subject to offset?          | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No  | □ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|          |   |   |             |
|          | Yes   | Other. Specify Garbage collection   |             |
| 4.7      | Triton Stone Grou                             |   | \$14,363.11 |
| 2        | Nonpriority Creditor's Name                   | Last 4 digits of account number   | \$14,303.11 |
|          | 10471 Washington Hwy<br>Glen Allen, VA 23059  | When was the debt incurred?   |             |
|          | Number Street City State Zlp Code             | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.             |   |             |
|          | ☐ Debtor 1 only                               | ☐ Contingent  |             |
|          | Debtor 2 only                                 | □ Unliquidated  |             |
|          | ■ Debtor 1 and Debtor 2 only                  | □ Disputed  |             |
|          |   | Type of NONPRIORITY unsecured claim:  |             |
|          | ☐ At least one of the debtors and another     | Student loans   |             |
|          | ☐ Check if this claim is for a community debt |   |             |
|          | Is the claim subject to offset?               | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|          | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |             |
|          | Yes   | Other. Specify Granite  |             |
|          |   | — Guior. Openiny  |             |
| 4.7<br>3 | U Bank  | Last 4 digits of account number 7000  | \$461.92    |
|          | Nonpriority Creditor's Name<br>1005 790448    | When was the debt incurred?   |             |
|          | Saint Louis, MO 63101                         | When was the debt medited:  |             |
|          | Number Street City State Zlp Code             | As of the date you file, the claim is: Check all that apply   |             |
|          | Who incurred the debt? Check one.             | ,   |             |
|          | ☐ Debtor 1 only                               | ☐ Contingent  |             |
|          | Debtor 2 only                                 | ☐ Unliquidated  |             |
|          | Debtor 1 and Debtor 2 only                    | ·   |             |
|          |   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |             |
|          | At least one of the debtors and another       | Student loans   |             |
|          | ☐ Check if this claim is for a community      | _   |             |
|          | debt Is the claim subject to offset?          | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |             |
|          | No  | □ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|          |   | _ successor in interest to Virginia Business  |             |
|          | Yes   | Other. Specify  Systems  Successor in Interest to Virginia Business  Systems                              |             |

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| 2 Denise F. Jackson  |  | Case number (if know)                        |              |
|--|--|--|--------------|
| Union  | Last 4 digits of account number                              | 1748   | \$100,475.00 |
| Nonpriority Creditor's Name 1658 State Farm Blvd.                    | When was the debt incurred?                                  | 2015   |              |
| Charlottesville, VA 22911  |  |  |              |
| Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | s: Check all that apply                      |              |
| Debtor 1 only  | <b>-</b>   |  |              |
| Debtor 2 only  | Contingent   |  |              |
| _ ''''   | Unliquidated   |  |              |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |              |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                 | d claim:                                     |              |
| ☐ Check if this claim is for a community                             | Student loans  |  |              |
| debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |              |
| ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |              |
| Yes  | Other. Specify Letter of Ci                                  | redit  |              |
| Union  | Last 4 digits of account number                              | 1747   | \$8,750.00   |
| Nonpriority Creditor's Name  |  |  | . ,          |
| 1658 State Farm Blvd.<br>Charlottesville, VA 22911                   | When was the debt incurred?                                  | 2015   |              |
| Number Street City State ZIp Code                                    | As of the date you file, the claim                           | is: Check all that apply                     |              |
| Who incurred the debt? Check one.                                    |  |  |              |
| Debtor 1 only  | Contingent   |  |              |
| Debtor 2 only  | ☐ Unliquidated   |  |              |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |              |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                 | d claim:                                     |              |
| ☐ Check if this claim is for a community                             | ☐ Student loans  |  |              |
| debt   |  | ration agreement or divorce that you did not |              |
| Is the claim subject to offset?                                      | report as priority claims                                    |  |              |
| ■ No   | Debts to pension or profit-sharing                           |  |              |
| Yes  | Other. Specify Letter of cr                                  | edit   |              |
| Union  | Last 4 digits of account number                              | 1537   | \$30,000.00  |
| Nonpriority Creditor's Name  |  |  | . ,          |
| 1658 State Farm Blvd.<br>Charlottesville, VA 22911                   | When was the debt incurred?                                  | 2015   |              |
| Number Street City State Zlp Code                                    | As of the date you file, the claim                           | is: Check all that apply                     |              |
| Who incurred the debt? Check one.                                    |  |  |              |
| Debtor 1 only  | Contingent   |  |              |
| Debtor 2 only  | ☐ Unliquidated   |  |              |
| Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |              |
| At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                 | d claim:                                     |              |
| ☐ Check if this claim is for a community                             | ☐ Student loans  |  |              |
| debt   |  | ration agreement or divorce that you did not |              |
| Is the claim subject to offset?                                      | report as priority claims                                    |  |              |
| No   | Debts to pension or profit-sharing                           | <del>-</del> •                               |              |
| Yes  | Other. Specify Letter of cr                                  | edit   |              |

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| Union   | Last 4 digits of account number 1536   | \$160 |
|---|--|-------|
| Nonpriority Creditor's Name<br>1658 State Farm Blvd.<br>Charlottesville, VA 22911 | When was the debt incurred? 2015   |       |
| Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply  |       |
| Who incurred the debt? Check one.   |  |       |
| Debtor 1 only   | Contingent   |       |
| Debtor 2 only   | ☐ Unliquidated   |       |
| Debtor 1 and Debtor 2 only  | ☐ Disputed   |       |
| At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |       |
| ☐ Check if this claim is for a community  | ☐ Student loans  |       |
| debt<br>Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                  |       |
| No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |       |
| Yes   | Other. Specify Letter of credit  |       |
| Union First Market Bank   | Last 4 digits of account number  | \$33  |
| Nonpriority Creditor's Name P O Box 940   | When was the debt incurred? 6/16   |       |
| Ruther Glen, VA 22546   |  |       |
| Number Street City State Zlp Code  Who incurred the debt? Check one.              | As of the date you file, the claim is: Check all that apply  |       |
| Debtor 1 only   | ☐ Contingent   |       |
| Debtor 2 only   | ☐ Unliquidated   |       |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |       |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |       |
| ☐ Check if this claim is for a community  | ☐ Student loans  |       |
| debt<br>Is the claim subject to offset?   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                  |       |
| □ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |       |
| ■ Yes   | Loan - subject to set off for engineering work valued at \$33,421.00 done on Village Green Subdivision, Augusta, VA      |       |
| Union First Market Bank   | Last 4 digits of account number  | \$16, |
| Nonpriority Creditor's Name   |  |       |
| P O Box 940<br>Ruther Glen, VA 22546  | When was the debt incurred? 2009   |       |
| Number Street City State Zlp Code  Who incurred the debt? Check one.              | As of the date you file, the claim is: Check all that apply  |       |
| Debtor 1 only   | ☐ Contingent   |       |
| Debtor 2 only   | ☐ Unliquidated   |       |
| Debtor 1 and Debtor 2 only  | □ Disputed   |       |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |       |
| ☐ Check if this claim is for a community  | ☐ Student loans  |       |
| debt<br>Is the claim subject to offset?   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |       |
| No  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |       |
| □ Yes   | Balance due on loan for subdivion purchase at Tylers Creek, Louisa, VA after  ■ Other. Specify all lots sold             |       |

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|     | Denise F. Jackson  | Case number (if know)  |             |  |  |
|-----|--|--|-------------|--|--|
| 4.8 | Valley Insulation Inc  | Last 4 digits of account number  | \$56,375.00 |  |  |
| 0   | Nonpriority Creditor's Name 1345 New Hope Road   | When was the debt incurred?  | <del></del> |  |  |
|     | Waynesboro, VA 22980  Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply  |             |  |  |
|     | ☐ Debtor 1 only ☐ Debtor 2 only  | ☐ Contingent ☐ Unliquidated  |             |  |  |
|     | ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No  | ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts |             |  |  |
|     | Yes  | Other. Specify Insulation  |             |  |  |
| 4.8 | Van Der Line Recycling  Nonpriority Creditor's Name  | Last 4 digits of account number  | \$16,953.96 |  |  |
|     | 2820 Hydraulic Road<br>Suite 1<br>Charlottesville, VA 22901  | When was the debt incurred?  |             |  |  |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only  | As of the date you file, the claim is: Check all that apply  Contingent  |             |  |  |
|     | Debtor 2 only  | ☐ Unliquidated   |             |  |  |
|     | ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No | □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts |             |  |  |
|     | Yes  | ■ Other. Specify Dumpster Rental   |             |  |  |
| 4.8 | Virginia Business Systems  Nonpriority Creditor's Name PO Box 790448   | Last 4 digits of account number  When was the debt incurred?   | Unknown     |  |  |
|     | Saint Louis, MO 63179-0448  Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply  |             |  |  |
|     | ☐ Debtor 1 only  | ☐ Contingent   |             |  |  |
|     | Debtor 2 only  | ☐ Unliquidated   |             |  |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed   |             |  |  |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |             |  |  |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |             |  |  |
|     | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |  |  |
|     | ☐ Yes  | Other. Specify   |             |  |  |

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| Denise F. Jackson   | Case number (if know)   |            |  |  |
|---|---|------------|--|--|
| Virginia Hardwood Floors                                  | Last 4 digits of account number   | \$1,483.6  |  |  |
| Nonpriority Creditor's Name<br>600 N. Kent St             | When was the debt incurred?   |            |  |  |
| Winchester, VA 22601                                      | when was the debt incurred:   |            |  |  |
| Number Street City State Zlp Code                         | As of the date you file, the claim is: Check all that apply   |            |  |  |
| Who incurred the debt? Check one.                         |   |            |  |  |
| Debtor 1 only   | ☐ Contingent  |            |  |  |
| Debtor 2 only   | ☐ Unliquidated  |            |  |  |
| Debtor 1 and Debtor 2 only                                | ☐ Disputed  |            |  |  |
| At least one of the debtors and another                   | Type of NONPRIORITY unsecured claim:  |            |  |  |
| ☐ Check if this claim is for a community                  | ☐ Student loans   |            |  |  |
| s the claim subject to offset?                            | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |
| ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |  |  |
| ☐ Yes   | ■ Other. Specify Hardwoood flooring   |            |  |  |
| Wayne Oxygen & Welding Supply                             | Last 4 digits of account number   | \$59.73    |  |  |
| Nonpriority Creditor's Name PO Box 1244                   | When was the debt incurred?   |            |  |  |
| Waynesboro, VA 22980                                      |   |            |  |  |
| Number Street City State ZIp Code                         | As of the date you file, the claim is: Check all that apply   |            |  |  |
| Who incurred the debt? Check one.  ☐ Debtor 1 only        | _   |            |  |  |
| ☐ Debtor 1 only ☐ Debtor 2 only                           | ☐ Contingent  |            |  |  |
| _   | ☐ Unliquidated  |            |  |  |
| Debtor 1 and Debtor 2 only                                | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |  |  |
| At least one of the debtors and another                   | ☐ Student loans   |            |  |  |
| ☐ Check if this claim is for a community debt             | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |  |  |
| s the claim subject to offset?                            | report as priority claims   |            |  |  |
| No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |  |  |
| Yes   | Other. Specify  |            |  |  |
| Wells Fargo   | Last 4 digits of account number 8405  | \$7,109.00 |  |  |
| Nonpriority Creditor's Name                               |   |            |  |  |
| P O Box 70241   | When was the debt incurred?   |            |  |  |
| Philadelphia, PA 19178  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply   |            |  |  |
| Who incurred the debt? Check one.                         |   |            |  |  |
| ☐ Debtor 1 only   | ☐ Contingent  |            |  |  |
| Debtor 2 only   | ☐ Unliquidated  |            |  |  |
| ■ Debtor 1 and Debtor 2 only                              | ☐ Disputed  |            |  |  |
| $\square$ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |  |  |
| ☐ Check if this claim is for a community                  | ☐ Student loans   |            |  |  |
| debt<br>s the claim subject to offset?                    | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |  |
| •   | ■ Other. Specify Equipment lease  |            |  |  |

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|   | Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson Case number (if know)   |  |  |                             |
|---|--|--|--|-----------------------------|
|   |  |  |  |                             |
| 4.8                                     | Wilson Read Mix  | Last 4 digits of account numb  | er   | \$4,891.95                  |
|   | Nonpriority Creditor's Name P O Box 1347   | When was the debt incurred?  |  |                             |
| _                                       | Harrisonburg, VA 22803   |  |  |                             |
|   | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the cla   | IM IS: Check all that apply                        |                             |
|   | Debtor 1 only  | Пол  |  |                             |
|   | Debtor 2 only  | ☐ Contingent   |  |                             |
|   | Debtor 1 and Debtor 2 only   | ☐ Unliquidated   |  |                             |
|   | •  | ☐ Disputed  Type of NONPRIORITY unsec  | ured eleim.  |                             |
|   | At least one of the debtors and another  | Student loans  | ureu ciaim.  |                             |
|   | ☐ Check if this claim is for a community debt  | _  | separation agreement or divorce that you did not   |                             |
|   | Is the claim subject to offset?  | report as priority claims  | eparation agreement of divorce that you did not    |                             |
|   | ■ No   | Debts to pension or profit-sh  | aring plans, and other similar debts               |                             |
|   | ☐ Yes  | ■ Other. Specify Concrete  | e  |                             |
|   |  | — Other: opening   | -  | _                           |
| Part 3:                                 | List Others to Be Notified About a D   | ebt That You Already Listed  |  |                             |
| 5. Use this                             |  | •  | at you already listed in Parts 1 or 2. For exam    | ple, if a collection agency |
| is tryin<br>have m                      | g to collect from you for a debt you owe to some than one creditor for any of the debts the                                      | someone else, list the original credito<br>at you listed in Parts 1 or 2, list the a | or in Parts 1 or 2, then list the collection agend | cy here. Similarly, if you  |
| notified                                | d for any debts in Parts 1 or 2, do not fill out   | or submit this page.   | •  | •                           |
|   | d Address  | On which entry in Part 1 or Part 2 did   | , .  |                             |
|   | upply Corp.<br>no Rd   | Line 4.2 of (Check one):   | Part 1: Creditors with Priority Unsecured Cl       |                             |
| 160 Expo Rd. ■ Part 2: Creditors with I |  | Part 2: Creditors with Nonpriority Unsecured   | d Claims   |                             |
|   |  | Last 4 digits of account number  |  |                             |
| Name and                                | d Address  | On which entry in Part 1 or Part 2 did   | you list the original creditor?                    |                             |
|   | an Express   | Line 4.7 of (Check one):   | ☐ Part 1: Creditors with Priority Unsecured Cla    | aims                        |
| PO Box                                  | _  |  | ■ Part 2: Creditors with Nonpriority Unsecured     | d Claims                    |
| Newari                                  | k, NJ 07101-1270   | Last 4 digits of account number  |  |                             |
| Nome on                                 | d Address  | On which entry in Part 1 or Part 2 did   | you list the original graditor?                    |                             |
|   | an Express   | Line <b>4.7</b> of (Check one):  | ☐ Part 1: Creditors with Priority Unsecured Cl     | aims                        |
| PO Box                                  | x 297879   |  | ■ Part 2: Creditors with Nonpriority Unsecured     |                             |
| Fort La                                 | uderdale, FL 33329-7879  | Last 4 digita of account number  | r art zi e realiere min rienprient, eneccare       | 2 0.00                      |
|   |  | Last 4 digits of account number  |  |                             |
|   | d Address  | On which entry in Part 1 or Part 2 did   |  |                             |
|   | f America<br>x 982236  | Line <b>4.12</b> of ( <i>Check one</i> ):  | Part 1: Creditors with Priority Unsecured Cl       |                             |
|   | o, TX 79998  |  | Part 2: Creditors with Nonpriority Unsecured       | d Claims                    |
|   | •  | Last 4 digits of account number  |  |                             |
| Name and                                | d Address  | On which entry in Part 1 or Part 2 did   | you list the original creditor?                    |                             |
|   | One Bank, USA  | Line <b>4.19</b> of ( <i>Check one</i> ):  | ☐ Part 1: Creditors with Priority Unsecured Cla    | aims                        |
| PO Box                                  |  |  | ■ Part 2: Creditors with Nonpriority Unsecured     | d Claims                    |
| Caroi                                   | Stream, IL 60197-6492  | Last 4 digits of account number  |  |                             |
|   |  |  |  |                             |
| Name and Citi                           | d Address  | On which entry in Part 1 or Part 2 did Line <b>4.29</b> of ( <i>Check one</i> ):     | <i>-</i>   | aims                        |
|   | Line 4.29 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |  |  |                             |
| PO Box                                  | x 6494   |  | — Fait 2. Creditors with Nonphority Onsecured      | a Gialliis                  |
| Sioux I                                 | Falls, SD 57117-6494   | Last 4 digits of account number  |  |                             |
|   |  |  |  |                             |
|   | d Address  | On which entry in Part 1 or Part 2 did   | <i>-</i>   |                             |
| Citi Ca                                 |  | Line <b>4.29</b> of ( <i>Check one</i> ):  | Part 1: Creditors with Priority Unsecured Cl       |                             |
|   | Falls, SD 57117  |  | Part 2: Creditors with Nonpriority Unsecured       | d Claims                    |
|   |  | Last 4 digits of account number  |  |                             |

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson                                       |   | Case number (if know)                                 |  |
|--|---|---|--|
| Name and Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?                        |  |
| Commonwealth Bldg Materials, Inc.  | Line <u>4.32</u> of ( <i>Check one</i> ): | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| PO Box 75747   |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| Baltimore, MD 21275-5747   | Last 4 digits of account number           |   |  |
| Name and Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?                        |  |
| Erie Insurance Co.   | Line <b>4.35</b> of ( <i>Check one</i> ): | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| 100 Erie Insurance Place   |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| Erie, PA 16530-1104  | Last 4 digits of account number           |   |  |
| Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  |   |   |  |
| Innsbrook Law Group, PC  | Line 2.5 of (Check one):                  | Part 1: Creditors with Priority Unsecured Claims      |  |
| PO Box 4170  |   | ☐ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| Glen Allen, VA 23058   | Last 4 digits of account number           |   |  |
| Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor? |   | ou list the original creditor?                        |  |
| Jamie A. Mastandrea, PC  | Line 4.1 of (Check one):                  | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| 5200-B Rolling Road  |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| Burke, VA 22015  | Last 4 digits of account number           |   |  |
| Name and Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?                        |  |
| Lowe's   | Line <u>4.53</u> of ( <i>Check one</i> ): | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| PO Box 1111  |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| North Wilkesboro, NC 28656   | Last 4 digits of account number           |   |  |
| Name and Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?                        |  |
| Noland Company   | Line <b>4.57</b> of ( <i>Check one</i> ): | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| c/o Derrick E. Rosser, P.C.  |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| 211-A England St.<br>Ashland, VA 23005   |   |   |  |
|  | Last 4 digits of account number           |   |  |
| Name and Address   | On which entry in Part 1 or Part 2 did y  |   |  |
| Sipes Construction   | Line <b>4.63</b> of ( <i>Check one</i> ): | ☐ Part 1: Creditors with Priority Unsecured Claims    |  |
| 465 Thorofare Road<br>Crimora, VA 24431  |   | ■ Part 2: Creditors with Nonpriority Unsecured Claims |  |
| O.I.I.O.C., 77. 27701  | Last 4 digits of account number           |   |  |

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim        |
|--------------|-----|---|-----|--------------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00         |
| Total claims |     |   |     |                    |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>54,467.85    |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00         |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00         |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>54,467.85    |
|              |     |   |     | Total Claim        |
|              | 6f. | Student loans   | 6f. | \$<br>31,928.32    |
| Total claims |     |   |     |                    |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00         |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00         |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>1,762,703.91 |

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| Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson |     | Case number (if know)                       |          | know) |              |  |
|--|-----|---|----------|-------|--------------|--|
|  | 6j. | Total Nonpriority. Add lines 6f through 6i. | -<br>6j. | \$    | 1,794,632.23 |  |

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| Fill in this infor  | mation to identify your  | case:              |             |                        |
|---------------------|--------------------------|--------------------|-------------|------------------------|
| Debtor 1            | lan R. Jackson           |                    |             |                        |
|                     | First Name               | Middle Name        | Last Name   |                        |
| Debtor 2            | Denise F. Jackso         | n                  |             |                        |
| (Spouse if, filing) | First Name               | Middle Name        | Last Name   |                        |
| United States Ba    | ankruptcy Court for the: | WESTERN DISTRICT ( | OF VIRGINIA |                        |
| Case number         |                          |                    |             |                        |
| (if known)          |                          |                    |             | ☐ Check if the amended |

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р   | erson or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|---|---|
| 2.1 | Angel Rivera<br>101D West Park Drive<br>Charlottesville, VA 22902   | Apartment rented                        |
| 2.2 | Carlos and Maria Umanzoa<br>101A West Park Drive<br>Charlottesville, VA 22902                               | Apartment rented                        |
| 2.3 | Cindy Merind<br>5398 Highway Nine -O-Three<br>Bracey, VA 23919  | House rented                            |
| 2.4 | Vaughn Meadows<br>101B West Park Drive<br>Charlottesville, VA 22902   | Apartment rented                        |
| 2.5 | Verizon<br>Bankruptcy Department<br>500 Technology Drive, #550<br>Saint Charles, MO 63304-2225              | Cell phone                              |

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| Fill in th              | is information to identify your ca  | ase:  |   |  |   |
|-------------------------|---|---|---|--|---|
| Debtor 1                | lan R. Jackson  |   |   |  |   |
| <b>D</b> 1              | First Name  | Middle Name   | Last Name   |  |   |
| Debtor 2<br>(Spouse if, | 2011100110011   | Middle Name   | Last Name   |  |   |
| United S                | tates Bankruptcy Court for the:   | WESTERN DISTRICT C  | OF VIRGINIA   |  |   |
| Case nu                 | mher  |   |   |  |   |
| (if known)              |   |   |   |  | ☐ Check if this is an amended filing                          |
| Officia                 | al Form 106H  |   |   |  |   |
| Sche                    | dule H: Your Code   | btors   |   |  | 12/15   |
| 1. Do                   | es  ithin the last 8 years, have you libra, California, Idaho, Louisiana, No. Go to line 3.  es. Did your spouse, former spouse, loumn 1, list all of your codebtorne 2 again as a codebtor only if the | Answer every question.  The are filing a joint case, of the are filing a joint case, of the area filing a joint case, of the area filing a joint case, or legal equivalent lives.  The area filing a joint case, or legal equivalent lives.  The area filing a joint case, or legal equivalent lives.  The area filing a joint case, or legal equivalent lives.  The area filing a joint case, or legal equivalent lives.  The area filing a joint case, or legal equivalent lives. | do not list either spouse as operty state or territory? erto Rico, Texas, Washing with you at the time? | a codebtor.  (Community property staton, and Wisconsin.)  your spouse is filing wire you have listed the c | ates and territories include<br>th you. List the person shown |
|                         | n 106D), Schedule E/F (Official F<br>Column 2.  | orm 106E/F), or Schedu  | ule G (Official Form 1060   | i). Use Schedule D, Sch  | edule E/F, or Schedule G to fil                               |
|                         | Column 1: Your codebtor Name, Number, Street, City, State and ZIP   | Code  |   | Column 2: The creditor Check all schedules the   | or to whom you owe the debt                                   |
|                         |   |   |   |  | at app.y.   |
| 3.1                     | Amy Jackson<br>794 Prospect Ave<br>Charlottesville, VA 22903  |   |   | □ Schedule D, line □ Schedule E/F, line □ Schedule G Suntrust Bank   |   |
| 3.2                     | Amy Jackson<br>794 Prospect Ave<br>Charlottesville, VA 22903  |   |   | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G ☐ Federal Loan  | e <u>4.36</u>   |
| 3.3                     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911   |   |   | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G A&M Supply Corp.                                      | e <u>4.1</u>  |

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| Debtor 1 | lan R. Jackson<br>Denise F. Jackson   | Case number (if known)  |
|----------|---|---|
|          | Additional Page to List More Codebtors                                      |   |
|          | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:                     |
| 3.4      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>☐ Schedule E/F, line4.15<br>☐ Schedule G<br>Brett Bickley                     |
| 3.5      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line  ■ Schedule E/F, line ☐ Schedule G Carl Corbin                                   |
| 3.6      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.32<br>☐ Schedule G<br>Commonwealth Bldg Materials, Inc. |
| 3.7      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line  |
| 3.8      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.5<br>☐ Schedule G<br>Allied concrete, Inc.              |
| 3.9      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.52<br>☐ Schedule G<br>Lowe's                            |
| 3.10     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line2.16<br>□ Schedule E/F, line<br>□ Schedule G<br>US Bank                           |

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| Debtor 1 | lan R. Jackson<br>Denise F. Jackson                             | Case number (if known)                          |
|----------|---|---|
|          |   |   |
|          | Additional Page to List More Codebtors  Column 1: Your codebtor | Column 2: The creditor to whom you owe the debt |
|          |   | Check all schedules that apply:                 |
| 3.11     | I & J Homebuilders, LLC   | ☐ Schedule D, line                              |
|          | 2272 Oakridge Court<br>Charlottesville, VA 22911                | ■ Schedule E/F, line4.53                        |
|          | Chanottesville, VA 22911  | ☐ Schedule G                                    |
|          |   | Lowe's LAR                                      |
|          |   |   |
| 3.12     | I & J Homebuilders, LLC   | ☐ Schedule D, line                              |
|          | 2272 Oakridge Court   | ■ Schedule E/F, line <b>4.29</b>                |
|          | Charlottesville, VA 22911                                       | ☐ Schedule G                                    |
|          |   | Citibank  |
|          |   |   |
| 3.13     | I & J Homebuilders, LLC   | ☐ Schedule D, line                              |
|          | 2272 Oakridge Court<br>Charlottesville, VA 22911                | ■ Schedule E/F, line <u>4.19</u>                |
|          | Onariottosvino, VA 22311  | ☐ Schedule G                                    |
|          |   | Capital One                                     |
| 0.44     | 10 Hlamakuildan 110   |   |
| 3.14     | I & J Homebuilders, LLC<br>2272 Oakridge Court                  | □ Schedule D, line                              |
|          | Charlottesville, VA 22911                                       | Schedule E/F, line 4.12                         |
|          | ,   | ☐ Schedule G<br>Bank of America                 |
|          |   | Dank of America                                 |
| 3 15     | I & J Homebuilders, LLC   | □ Schodulo D. lino                              |
| 5.15     | 2272 Oakridge Court   | □ Schedule D, line<br>■ Schedule E/F, line 4.7  |
|          | Charlottesville, VA 22911                                       | □ Schedule G                                    |
|          |   | American Express                                |
|          |   |   |
| 3.16     | I & J Homebuilders, LLC   | ☐ Schedule D, line                              |
|          | 2272 Oakridge Court   | ■ Schedule E/F, line 4.2                        |
|          | Charlottesville, VA 22911                                       | ☐ Schedule G                                    |
|          |   | ABC Supply Co. Inc.                             |
|          |   |   |
| 3.17     | I & J Homebuilders, LLC   | ☐ Schedule D, line                              |
|          | 2272 Oakridge Court<br>Charlottesville, VA 22911                | ■ Schedule E/F, line <u>4.81</u>                |
|          | Onanodesvine, VA 22311  | ☐ Schedule G                                    |
|          |   | Van Der Line Recycling                          |
|          |   |   |

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| Debtor 1 | lan R. Jackson<br>Denise F. Jackson   | Case number (if known)   |
|----------|---|--|
|          | Additional Page to List More Codebtors                                      |  |
|          | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:          |
| 3.18     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.54<br>☐ Schedule G<br>Luck Stone             |
| 3.19     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line2.3 □ Schedule E/F, line □ Schedule G Nationstar Mortgage              |
| 3.20     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank    |
| 3.21     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank    |
| 3.22     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank    |
| 3.23     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line2.8<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank |
| 3.24     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>United Bank                |

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| Debtor 1 | lan R. Jackson<br>Denise F. Jackson   | Case number (if known)  |
|----------|---|---|
|          | Additional Page to List More Codebtors                                      |   |
|          | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:           |
| 3.25     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Larry F. Gregory            |
| 3.26     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.44<br>☐ Schedule G<br>Jackson Management LLC  |
| 3.27     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.39<br>☐ Schedule G<br>Foster Fuels, Inc.      |
| 3.28     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.61<br>☐ Schedule G<br>Rockydale Quaries Corp. |
| 3.29     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.86<br>☐ Schedule G<br>Wilson Read Mix         |
| 3.30     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line<br>☐ Schedule G<br>U Bank                      |
| 3.31     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.74<br>☐ Schedule G<br>Union                   |

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| Ian R. Jackson Debtor 1 Denise F. Jackson |   | Case number (if known)  |  |  |  |  |
|---|---|---|--|--|--|--|
|   | Additional Page to List More Codebtors                                      |   |  |  |  |  |
|   | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:       |  |  |  |  |
| 3.32                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.75<br>☐ Schedule G<br>Union               |  |  |  |  |
| 3.33                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.76<br>☐ Schedule G<br>Union               |  |  |  |  |
| 3.34                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line4.77<br>☐ Schedule G<br>Union               |  |  |  |  |
| 3.35                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank |  |  |  |  |
| 3.36                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank |  |  |  |  |
| 3.37                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank |  |  |  |  |
| 3.38                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank |  |  |  |  |

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| Ian R. Jackson Debtor 1 Denise F. Jackson |   | Case number (if known)   |  |  |  |
|---|---|--|--|--|--|
|   |   |  |  |  |  |
|   | Additional Page to List More Codebtors                                      |  |  |  |  |
|   | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:              |  |  |  |
| 3.39                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ■ Schedule D, line2.14<br>□ Schedule E/F, line<br>□ Schedule G<br>Union First Market Bank    |  |  |  |
| 3.40                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.1<br>☐ Schedule G<br>Buckingham County Treasurer |  |  |  |
| 3.41                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.2<br>☐ Schedule G<br>County of Fluvanna          |  |  |  |
| 3.42                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.3<br>☐ Schedule G<br>County of Mecklenburg       |  |  |  |
| 3.43                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.4<br>☐ Schedule G<br>Fluvanna County             |  |  |  |
| 3.44                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.5<br>☐ Schedule G<br>Fluvanna County             |  |  |  |
| 3.45                                      | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.6<br>☐ Schedule G<br>Greene County Treasurer     |  |  |  |

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| Debtor 1 | lan R. Jackson<br>Denise F. Jackson   | Case number (if known)  |
|----------|---|---|
|          | Additional Page to List More Codebtors                                      |   |
|          | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:                     |
| 3.46     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line  ■ Schedule E/F, line ☐ Schedule G Louisa County Treasurer                       |
| 3.47     | I & J Homebuilders, LLC<br>2272 Oakridge Court<br>Charlottesville, VA 22911 | ☐ Schedule D, line<br>■ Schedule E/F, line2.8<br>☐ Schedule G<br>Nelson County Treasurer            |
| 3.48     | Jack Sadler<br>2480 Milton Hills Dr.<br>Charlottesville, VA 22902           | ☐ Schedule D, line<br>■ Schedule E/F, line4.32<br>☐ Schedule G<br>Commonwealth Bldg Materials, Inc. |
| 3.49     | Route 15, LLC<br>PO Box 5428<br>Charlottesville, VA 22905                   | ☐ Schedule D, line<br>■ Schedule E/F, line2.5<br>☐ Schedule G<br>Fluvanna County                    |
| 3.50     | Scotty Sipe dba Sipe's Construction<br>PO Box 56<br>Crimora, VA 24431       | ☐ Schedule D, line<br>■ Schedule E/F, line4.6<br>☐ Schedule G<br>Allied Portable Toilets            |
| 3.51     | Scotty Sipe dba Sipe's Construction<br>PO Box 56<br>Crimora, VA 24431       | ☐ Schedule D, line<br>■ Schedule E/F, line4.37<br>☐ Schedule G<br>Ferguson Enterprises              |
| 3.52     | Scotty Sipe dba Sipe's Construction<br>PO Box 56<br>Crimora, VA 24431       | ☐ Schedule D, line<br>■ Schedule E/F, line<br>☐ Schedule G<br>Brett Bickley                         |

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| Debtor 1 | Denise F. Jackson   | Case number (if known)  |
|----------|---|---|
|          | Additional Page to List More Codebtors                                |   |
| -        | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.53     | Scotty Sipe dba Sipe's Construction<br>PO Box 56<br>Crimora, VA 24431 | ☐ Schedule D, line<br>■ Schedule E/F, line<br>☐ Schedule G<br>Carl Corbin       |

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|             |  |  |                       |             |     | _               |                               |         |                           |          |
|-------------|--|--|-----------------------|-------------|-----|-----------------|-------------------------------|---------|---------------------------|----------|
|             | in this information to identify your   |  |                       |             |     |                 |                               |         |                           |          |
| Deb         | otor 1 Ian R. Jac  | cson   |                       |             | _   |                 |                               |         |                           |          |
|             | otor 2 Denise F. s   | Jackson  |                       |             | _   |                 |                               |         |                           |          |
| Uni         | ted States Bankruptcy Court for the  | ne: WESTERN DISTRIC                                      | T OF VIRGINIA         |             | _   |                 |                               |         |                           |          |
|             | se number  |  | _                     |             |     | Check if t      |                               |         |                           |          |
|             |  |  |                       |             |     |                 | plemer                        | nt shov | wing postpetition         |          |
| O:          | fficial Form 106I  |  |                       |             |     | <u></u>         |                               |         | e following date:         |          |
|             |  | a a ma   |                       |             |     | MIM /           | DD/ Y\                        | / Y Y   |                           |          |
|             | chedule I: Your Indicate as possible to the complete and accurate accurate as possible to the complete and accurate accurate and accurate as possible to the complete accurate and accurate acc |  |                       | (5.1)       |     | 15.14           | o\                            |         |                           | 12/15    |
| spo<br>atta | plying correct information. If you use. If you are separated and you has separate sheet to this form  Describe Employmen   | our spouse is not filing w<br>. On the top of any additi | ith you, do not inclu | ıde inforr  | nat | ion about you   | ur spou                       | ıse. If | more space is             | needed,  |
| 1.          | Fill in your employment information.   |  | Debtor 1              | Debtor 1    |     |                 | Debtor 2 or non-filing spouse |         |                           |          |
|             | If you have more than one job, attach a separate page with   | Employment status  | ☐ Employed            |             |     | ■ Employed      |                               |         |                           |          |
|             | information about additional employers.  | , ,  | ■ Not employed        |             |     |                 | ☐ Not employed                |         |                           |          |
|             |  | Occupation   | Retired               |             |     | Во              | okkee                         | eper    |                           |          |
|             | Include part-time, seasonal, or self-employed work.  | Employer's name  |                       |             |     | Br              | owns                          | HVAC    |                           |          |
|             | Occupation may include studen or homemaker, if it applies.   | Employer's address                                       |                       |             |     |                 |                               |         |                           |          |
|             |  | How long employed t                                      | here?                 |             |     |                 | Si                            | nce 8   | 3/16                      |          |
| Par         | t 2: Give Details About M  | onthly Income  |                       |             |     |                 |                               |         |                           |          |
|             | mate monthly income as of the use unless you are separated.  | date you file this form. If                              | you have nothing to r | eport for   | any | line, write \$0 | in the s                      | space.  | Include your no           | n-filing |
|             | u or your non-filing spouse have a space, attach a separate sheet  |  | ombine the informatio | n for all e | mp  | oyers for that  | persor                        | on the  | e lines below. If         | you need |
|             |  |  |                       |             |     | For Debtor      | 1                             |         | Debtor 2 or filing spouse |          |
| 2.          | List monthly gross wages, sa deductions). If not paid monthly  |  |                       | 2.          | \$  |                 | 0.00                          | \$      | 1,000.00                  |          |
| 3.          | Estimate and list monthly over   | rtime pay.   |                       | 3.          | +\$ |                 | 0.00                          | +\$_    | 0.00                      |          |
| 4.          | Calculate gross Income. Add  | line 2 + line 3.   |                       | 4.          | \$  | 0.0             | 00                            | \$_     | 1,000.00                  |          |

lan R. Jackson Debtor 1 Denise F. Jackson Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here 1,000.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 0.00 208.35 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5g. 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 208.35 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 0.00 791.65 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 669.00 0.00 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 1,028.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 32.81 Other monthly income. Specify: 8h.+ \$ 8h. \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 1,697.00 32.81 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 1.697.00 \$ 2,521.46 824.46 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,521.46 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. п Yes. Explain: Wife to start receiving Social Security for about \$1000 in 9/17.

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|       |                              |                                    |                           |   |  | •           |                   |   |
|-------|------------------------------|------------------------------------|---------------------------|---|--|-------------|-------------------|---|
| Filli | n this informa               | ation to identify ye               | our case:                 |   |  |             |                   |   |
| Debt  | tor 1                        | lan R. Jacks                       | on                        |   |  | Ch          | eck if this is:   |   |
|       |                              |                                    |                           |   |  |             | An amended filing |   |
| Debt  |                              | Denise F. Ja                       | ıckson                    |   |  |             |                   | wing postpetition chapter the following date: |
| (Spo  | ouse, if filing)             |                                    |                           |   |  |             | 13 expenses as or | the following date.                           |
| Unite | ed States Bankı              | ruptcy Court for the               | : WESTE                   | ERN DISTRICT OF VIRGIN  | IIA                                    |             | MM / DD / YYYY    |   |
|       | e number<br>nown)            |                                    |                           |   |  |             |                   |   |
| Of    | ficial Fo                    | rm 106J                            |                           |   |  |             |                   |   |
|       |                              | J: Your                            | Fynar                     | 1606  |  |             |                   | 12/1  |
| Be a  | as complete<br>rmation. If m | and accurate as                    | s possible<br>eeded, atta | . If two married people ar<br>ich another sheet to this       |  |             |                   | or supplying correct                          |
| Part  | . Desci                      | ribe Your House                    | ehold                     |   |  |             |                   |   |
| 1.    | Is this a joir               |                                    | silolu                    |   |  |             |                   |   |
|       | □ No. Go to                  |                                    |                           |   |  |             |                   |   |
|       | Yes. Doe                     | es Debtor 2 live                   | in a separ                | ate household?  |  |             |                   |   |
|       | ■ N                          |                                    | •                         |   |  |             |                   |   |
|       |                              |                                    | st file Offic             | ial Form 106J-2, <i>Expense</i> s                             | for Separate House                     | ehold of De | ebtor 2.          |   |
| 2.    | Do you hav                   | e dependents?                      | ■ No                      |   |  |             |                   |   |
|       | Do not list D<br>Debtor 2.   | ebtor 1 and                        | ☐ Yes.                    | Fill out this information for each dependent                  | Dependent's relat<br>Debtor 1 or Debto |             | Dependent's age   | Does dependent live with you?                 |
|       | Do not state                 | the                                |                           |   |  |             |                   | □ No  |
|       | dependents                   |                                    |                           |   |  |             |                   | ☐ Yes   |
|       |                              |                                    |                           |   |  |             |                   | □ No  |
|       |                              |                                    |                           |   |  |             |                   | ☐ Yes   |
|       |                              |                                    |                           |   |  |             |                   | □ No  |
|       |                              |                                    |                           |   |  |             |                   | ☐ Yes   |
|       |                              |                                    |                           |   |  |             |                   | □ No  |
| 3.    | Do your exi                  | penses include                     | _                         | Lau   |  |             |                   | ☐ Yes   |
| 0.    | expenses o                   | f people other t<br>d your depende | than _                    | No<br>Yes   |  |             |                   |   |
| Part  | 2: Estim                     | ate Your Ongoi                     | ing Month                 |   |  |             |                   |   |
| exp   |                              | a date after the                   |                           | uptcy filing date unless y<br>y is filed. If this is a supp   |  |             |                   |   |
| the   |                              | h assistance an                    |                           | government assistance in<br>cluded it on <i>Schedule I:</i> Y |  |             | Your exp          | enses   |
| 4.    | The rental of                | or home owners                     | shin avnor                | nses for your residence. In                                   | nclude firet mortace                   | _           |                   |   |
| 4.    |                              | nd any rent for th                 |                           |   | ncidde iiist mortgag                   | 4.          | \$                | 0.00  |
|       | If not include               | ded in line 4:                     |                           |   |  |             |                   |   |
|       | 4a. Real                     | estate taxes                       |                           |   |  | 4a.         | ·                 | 0.00  |
|       |                              | erty, homeowner'                   |                           |   |  | 4b.         |                   | 0.00  |
|       |                              |                                    | •                         | upkeep expenses   |  | 4c.         |                   | 0.00  |
| 5     |                              | owner's associa                    |                           | dominium dues<br>our residence, such as ho                    | mo oquity loons                        | 4d.<br>5.   | · -               | 0.00  |

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| Case number (it known)  |     |               | lan R. Ja    |   | Casa sum           | abor (if known)  |                              |
|---|-----|---------------|--------------|---|--------------------|------------------|------------------------------|
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6b. S. 150,00 6c. Telephrone, coll phone, Internet, satellite, and cable services 6c. \$ 150,00 6c. Telephrone, coll phone, Internet, satellite, and cable services 6c. \$ 150,00 6c. Telephrone, coll phone, Internet, satellite, and cable services 6c. \$ 150,00 6c. Telephrone, coll phone, Internet, satellite, and cable services 6c. \$ 150,00 6c. \$ 150, | Den |               | Denise r     | · Jackson   | Case num           | iber (ii known)  |                              |
| 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, lintemet, statellite, and cable services 6c. \$ 150.00 6d. Other, Specify. 7c. \$ 500.00 7d. Childcare and children's education costs 7d. \$ 500.00 7d. Childcare and children's education costs 7d. \$ 500.00 7d. Childcare and children's education costs 7d. \$ 100.00 7d. Personal care products and services 7d. \$ 100.00 7d. Personal care products and services 7d. \$ 100.00 7d. Personal care products and services 7d. \$ 100.00 7d. Personal care products and services 7d. Medical and dental expenses 7d. \$ 100.00 7d. Personal care products and services 7d. Medical and dental expenses 7d. \$ 100.00 7d. Personal care products and services 7d. Personal care products and services 7d. Medical and dental expenses 7d. \$ 100.00 7d. Personal care products and services 7d. Charitable contributions and religious donations 7d. Charitable contributions and religious donations 7d. Charitable contributions and religious donations 7d. Lie insurance 7d. S. \$ 622.20 7d. Chier. Sp   | 6.  |               |              |   |                    | •                |                              |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Othor. Spootly.  7. Food and housekeeping supplies 7. \$ 500.00 8d. Othor. Spootly.  8 \$ 100.00 9 Clothing, laundry, and dry cleaning 9 \$ 100.00 10. Personal care products and services 11. \$ 100.00 11. Medical and dental expenses 11. \$ 100.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. \$ 200.00 14. Charitable contributions and religious donations 14. \$ 250.00 15. Insurance 15. Insurance 15. Insurance 15. Insurance 15. Les and the insurance deducted from your pay or included in lines 4 or 20. 15a. Left insurance 15b. Vehicle insurance 15c. \$ 622.20 15b. Health insurance 15c. \$ 622.20 15c. Vehicle insurance 15d. Other insurance specify: 15d. Other insurance specify: 17d. Car payments for Vehicle 1 17e. Car payments for Vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or vehicle 2 17e. Other Specify: 17e. Car payments or other property specific service who do not tive with you. 18e. \$ 0.00 19e. Vehicle 2 19e. Other payments or other property specific service who do not tive with you. 19e. Other payments or other property specific service who do not tive with you. 19e. Other payments or other property specific ser   |     |               | •            | · · · · · · · · · · · · · · · · · · ·                                       |                    | ·                |                              |
| 6 d. Other. Specify:  Food and housekeeping supplies  7   |     |               |              |   |                    | *                |                              |
| Food and housekeeping supplies   7. \$   500.00   |     |               | •            |   |                    |                  |                              |
| 8.   Childcare and children's education costs   8.   \$   0.00     10.   Personal care products and services   10.   \$   100.00     10.   Personal care products and services   10.   \$   100.00     11.   Medical and dental expenses   11.   \$   100.00     12.   Transportation. Include gas, maintenance, bus or train fare.   12.   \$   300.00     13.   Instrainment, clubs, recreation, newspapers, magazines, and books   13.   \$   200.00     14.   Charitable contributions and religious donations   14.   \$   259.00     15.   Insurance.   Doubt of the lineurance deducted from your pay or included in lines 4 or 20.     15.   Leaf insurance   15.   \$   \$   \$   \$   \$   \$   \$   \$   \$  | _   |               |              | •   |                    | ·                |                              |
| 10. Clothing, laundry, and dry cleaning 11. Personal care products and services 11. S 100.00 12. Transportation, include gas, maintenance, bus or train fare. 13. S 200.00 13. Elitertalinment, clubs, recreation, newspapers, magazines, and books 13. S 200.00 14. Charitable contributions and religious donations 15. Insurance. 16. Charitable contributions and religious donations 17. Insurance. 18. Life insurance deducted from your pay or included in lines 4 or 20. 19. Life insurance defines and religious donations 19. S 15. Life insurance deducted from your pay or included in lines 4 or 20. 19. Life insurance. 19. Life insurance. 19. S 10.00 19. Specify: 19. S 10.00 19. Specify: 19. S 10.00 19. S   |     |               |              |   |                    | ·                |                              |
| 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. S  | -   | -             |              |   |                    |                  | -                            |
| 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Elentraliment, clubs, recreation, newspapers, magazines, and books 13. S 200.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. S 176.00 15c. Vehicle insurance 15d. S 103.00 15d. Other insurance. Specify: 15d. S 103.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15r. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17c. Other, Specify: 17d. S 0.00 17d. Other, Specify: 17d. S 0.00 17d. Other payments for Vehicle 2 17d. S 0.00 17d. Other payments for Vehicle 2 17d. S 0.00 17d. Other payments you make to support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18 Your payments you make to support others who do not live with you. 19 Other payments you make to support others who do not live with you. 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 2 20a. Mortgages on other property 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 20d. Property expenses not included in lines 4 or 5 of this form or on Schedule I. Your Income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 22b. Copy line 22 (monthly expenses from line 22c above. 23b. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Do you expect to linish paying to yo   | -   |               | •            |   |                    | ·                | -                            |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include can payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 200.00  14. \$ 250.00  15. Insurance. Do not include insurance 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance specify: 15c. Vehicle insu   |     |               | -            |   |                    | ·                | -                            |
| Do not include car payments.  12. \$ 300.00  13. \$ 200.00  14. Charitable contributions and religious donations  14. \$ 250.00  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 176.00  15c. Vehicle insurance  15c. Vehicle insurance.  15c. Vehicle insurance.  15d. \$ 0.00  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15pecify:  16. \$ 0.00  17. Installment or lease payments:  17a. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Car payments for Vehicle 2  17d. Car payments for Vehicle 2  17d. S 0.00  17d. Other payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20d. \$ 0.00  20d. Property, homeowner's, or renter's insurance  20d. \$ 0.00  20d. Homeowner's association or condominium dues  20d. \$ 0.00  20d. Waltenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Other: Specify:  21. +\$ 0.000  22c. Add lines 24 through 21.  23c. Calculate your monthly expenses from line 22c above.  23d. \$ 2,521.46  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  23d. \$ 1,048.85   |     |               |              |   | 11.                | <b>&gt;</b>      | 100.00                       |
| 13. Entertaliment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. \$ 250.00  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 176.00 15c. Vehicle insurance 15c. \$ 103.00 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments or alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeower's, or renter's insurance 20c. Specify: 21c. Other: Specify: 22c. Add lines 2 through 21. 22c. Calculate your monthly expenses 22a. Add lines 4 through 21. 23c. Copy jour e2 (monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. 23c. Copy jour and increase or decrease in your expenses within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?   | 12. |               |              |   | 12.                | \$               | 300.00                       |
| 14.   Section   14.   Section   15.   Insurance.   15.   Insurance.   15.   Insurance.   15.   Insurance   Insu   | 13. |               |              |   |                    |                  |                              |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance   |     |               |              |   |                    | ·                |                              |
| Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. S  |     |               |              | ······································                                      |                    |                  | 250.00                       |
| 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specity: 15d. \$ 103.00  15d. Other insurance. Specity: 15d. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Spec  |     |               |              | surance deducted from your pay or included in lines 4 or 20.                |                    |                  |                              |
| 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$ 103.00    16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00    17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 819.11    17b. Car payments for Vehicle 2 17b. \$ 0.00    17c. Other. Specify: 17c. \$ 0.00    17d. Other. Specify: 17d. \$ 0.00    17d. Other. Specify: 17d. \$ 0.00    17d. Other specify: 17d. \$ 0.00    18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00    19. Other payments you make to support others who do not live with you. \$ 0.00    20a. Specify: 19.  20a. Mortgages on other property   20a. \$ 0.00    20b. Real estate taxes 20b. \$ 0.00    20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00    20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00    20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00    20d. Homeowner's association or condominium dues 20e. \$ 0.00    21. Other: Specify: 21. +\$ 0.00    22. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2    22a. Add lines 4 through 21. \$ 3,570.31    23c. Calculate your monthly expenses from line 22c above. 23a. \$ 2,521.46    23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,521.46    23b. Copy your monthly expenses from line 22c above. 23c. \$ 1,048.85    24d. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to linish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a moodification to the terms of your mortgage?  |     | 15a.          | Life insura  | ince  | 15a.               | \$               | 622.20                       |
| 15d. Other insurance. Specify:  15d. S 0.00  17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  17a. S 819.11  17b. Car payments for Vehicle 1  17a. S 819.11  17b. Car payments for Vehicle 2  17b. S 0.00  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. S 0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I).  18. S 0.00  19. Other payments you make to support others who do not live with you.  Specify:  19.  19.  10. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  20a. Mortgages on other property  20a. S 0.00  20b. Real estate taxes  20b. S 0.00  20c. Property, homeowner's, or renter's insurance  20c. S 0.00  20d. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  20e. Homeowner's association or condominium dues  20f. Other: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Subtract your monthly expenses from line 22c above.  23b. Copy your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  24b. Do you expect to linish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?   |     | 15b.          | Health ins   | urance  | 15b.               | \$               | 176.00                       |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17b. \$  17b. \$  17c. Car payments for Vehicle 2  17b. \$  17c. Other. Specify:  17c. Other. Specify:  17d. Other spayments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. S  0.00  20b. Real estate taxes  20b. S  0.00  20c. Property, homeowner's, or renter's insurance  20c. \$  0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$  0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$  0.00  20d. Homeowner's association or condominium dues  20e. \$  0.00  21. +\$  0.00  22c. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add lines 24 mortgage and 22b. The result is your monthly expenses.  3,570.31  23. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b\$  3,570.31  24. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  |     | 15c.          | Vehicle ins  | surance   | 15c.               | \$               | 103.00                       |
| Specify:    15.   Installment or lease payments:   17a.   2   |     | 15d.          | Other insu   | rance. Specify:   | 15d.               | \$               | 0.00                         |
| 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. S 0.00 17d. Other. Specify: 18. S 0.00 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. S 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Montgages on other property 20a. S 0.00 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from line 22c above. 23c. Subtract your monthly net income. 23c. \$ 1,048.85  | 16. |               |              | clude taxes deducted from your pay or included in lines 4 or 20             |                    |                  |                              |
| 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. Specify: 19. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22c. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 24 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 24 through 21. 23c. Subtract your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Subtract your monthly expenses from line 22c above. 23b\$ 3,570.31  23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a mondification to the terms of your mortgage?   |     |               | ,            |   | 16.                | \$               | 0.00                         |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18b. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). 18b. \$ 0.00 19b. Other payments you make to support others who do not live with you. \$ 0.00 19b. Specify: 19b. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20c. Calculate your monthly expenses 22a. Add lines 22a and 22b. The result is your monthly expenses. \$ 3,570.31 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 22a and 22b. The result is your monthly expenses. \$ 3,570.31 23c. Calculate your monthly expenses from line 22c above. 23a. \$ 2,521.46 23b. Copy your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a mondification to the terms of your mortgage?  | 17. |               |              |   | 47-                | •                |                              |
| 17c. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Specify: 19. Under real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Specify: 19. 20b. Specify: 20b. Specify: 20c. Property, homeowner's, or renter's insurance 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20c. Homeowner's association or condominium dues 20c. \$0.00 20c. Homeowner's association or condominium dues 20c. \$0.00 20c. Other: Specify: 21c. +\$0.00 20c. Other: Specify: 21c. +\$0.00 20c. Calculate your monthly expenses 22c. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 3,570.31 22c. Add line 22a and 22b. The result is your monthly expenses from line 22c above. 23b. \$0.50.31 22c. Subtract your monthly expenses from line 22c above. 23c. \$0.00 20c. \$0.00 20   |     |               |              |   |                    |                  |                              |
| 17d. Other. Specify:  17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. \$ 0.00  19. Other payments you make to support others who do not live with you.  Specify:  19.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20e. Homeowner's association or condominium dues  20e. Homeowner's association or condominium dues  20e. \$ 0.00  21. Other: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income)  23a. Copy your monthly net income.  23a. Copy your monthly expenses from line 22c above.  23b\$ 3,570.31  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  24. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  ■ No.   |     |               |              |   |                    | *                |                              |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i).  18. \$ 0.00  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20e. Homeowner's association or condominium dues  20e. \$ 0.00  20f. Other: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income)  23a. Copy your monthly expenses from line 22c above.  23b. Subtract your monthly expenses from your monthly income.  The result is your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly expenses from your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               |              | ·   |                    |                  |                              |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  Other payments you make to support others who do not live with you.  Specify:  19.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  20e. Homeowner's association or condominium dues  20e. \$ 0.00  20f. Homeowner's association or condominium dues  20e. \$ 0.00  21. Other: Specify:  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly expenses from your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   |     |               |              | •   |                    | \$               | 0.00                         |
| 19. Other payments you make to support others who do not live with you.  Specify:  19.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20c. Maintenance, repair, and upkeep expenses  20d. Maintenance, repair, and upkeep expenses  20e. Mortgages on other property  20d. Maintenance, repair, and upkeep expenses  20e. Mortgages on other property  20d. Maintenance, repair, and upkeep expenses  20e. Mortgages  20e. Society  20f. Property, homeowner's association or condominium dues  20e. Society  20e. Society  20f. Property, homeowner's association or condominium dues  20e. Society  21. +\$0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income)  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. Society of the schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly expenses from your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  | 18. | Your          | payments     | of alimony, maintenance, and support that you did not rep                   | ort as             | \$               | 0.00                         |
| Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23d. \$ 2,521.46 25d. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  | 19  |               |              |   | 1001).             | \$               |                              |
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| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.00  21. Other: Specify: 21. +\$ 0.00  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23a. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your montgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   | 20. |               |              | erty expenses not included in lines 4 or 5 of this form or on               |                    | our Income.      |                              |
| 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy lines 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses in your expenses within the year after you file this form? For example, do you expect an increase or decrease in your expenses within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?   |     |               |              |   |                    |                  | 0.00                         |
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| 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23c. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               |              | 41  |                    |                  |                              |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly net income.  23c. Subtract your monthly net income.  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  | 22. |               | •            | •   |                    |                  | 0.570.04                     |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  \$\frac{3,570.31}{3,570.31}\$  23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. Subtract your monthly net income.  23c. \$\frac{-1,048.85}{3,570.31}\$  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  \$\begin{array}{c} \frac{3,570.31}{3,570.31} \\ \frac{1,048.85}{3,570.31} \\ \frac{1,048.85}{3,570.   |     |               |              | =   | 0.1.0              | <b>\$</b>        | 3,570.31                     |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22c above.  23b. Copy your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               |              |   | 6J-2               | l '              |                              |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 2,521.46  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   |     | 22c. <i>F</i> | Add line 22a | a and 22b. The result is your monthly expenses.                             |                    | \$               | 3,570.31                     |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 2,521.46  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   | 23. | Calcu         | ılate vour ı | monthly net income.   |                    |                  |                              |
| 23b. Copy your monthly expenses from line 22c above.  23b\$ 3,570.31  23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               | •            |   | 23a.               | \$               | 2.521.46                     |
| 23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               |              | ,   |                    |                  |                              |
| The result is your <i>monthly net income</i> .  23c. \$ -1,048.85  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.   |     | -             | 177-4        | , ,   | , , ,              |                  |                              |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     | 23c.          |              |   | 220                | ·                | -1 0/18 85                   |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  |     |               | The result   | is your monthly net income.   | ∠3C.               | Ψ                | -1,040.03                    |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.  | 24  | Do vo         | nii Aynact 1 | an increase or decrease in your expenses within the year of                 | fter you file this | s form?          |                              |
| modification to the terms of your mortgage?  No.  | ۷4. | For ex        | ample, do vo | ou expect to finish paying for your car loan within the year or do you expe | ect your mortgage  | payment to incre | ase or decrease because of a |
|   |     |               |              |   | ,                  | . ,              |                              |
| ☐ Yes. Explain here:  |     | ■ No          | ).           |   |                    |                  |                              |
|   |     | ☐ Ye          | es.          | Explain here:   |                    |                  |                              |

| ■ No.  |               |
|--------|---------------|
| ☐ Yes. | Explain here: |

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| Fill in this infor  | mation to identify your                          | case:                      |                                    |   |
|---------------------|--|----------------------------|------------------------------------|---|
| Debtor 1            | lan R. Jackson                                   |                            |                                    |   |
|                     | First Name                                       | Middle Name                | Last Name                          |   |
| Debtor 2            | Denise F. Jackso                                 |                            |                                    |   |
| (Spouse if, filing) | First Name                                       | Middle Name                | Last Name                          |   |
| United States Ba    | ankruptcy Court for the:                         | WESTERN DISTRICT C         | F VIRGINIA                         |   |
| Case number         |  |                            |                                    |   |
| (if known)          |  |                            |                                    | ☐ Check if this is an amended filing  |
| Official Forr       |  | an Individual              | Debtor's Sched                     | u <b>les</b> 12/15  |
|                     |  |                            |                                    | 12.10   |
| f two married pe    | eople are filing togethe                         | r, both are equally respor | sible for supplying correct info   | rmation.  |
| btaining money      |  | n connection with a bank   |                                    | a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20         |
| Sign                | n Below  |                            |                                    |   |
| Did you pa          | y or agree to pay some                           | eone who is NOT an attor   | ney to help you fill out bankrupto | cy forms?   |
| ■ No                |  |                            |                                    |   |
| ☐ Yes. N            | Name of person                                   |                            |                                    | Attach Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119) |
|                     | lty of perjury, I declare<br>e true and correct. | that I have read the sum   | nary and schedules filed with th   | is declaration and  |
| X /s/ lan           | R. Jackson                                       |                            | X /s/ Denise F. Jacks              | son   |
|                     | Jackson  |                            | Denise F. Jackson                  |   |
| Signatu             | re of Debtor 1                                   |                            | Signature of Debtor 2              |   |
| Date _              | February 13, 2017                                |                            | Date February 13                   | s, 2017   |

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| Fill               | in this info   | mation to identify you                         | r case:                                    |  |   |   |
|--------------------|--|--|--|--|---|---|
| Del                | otor 1   | lan R. Jackson                                 |  |  |   |   |
|                    |  | First Name                                     | Middle Name                                | Last Name  |   |   |
|                    | otor 2<br>ouse if, filing)   | Denise F. Jacks                                | Middle Name                                | Last Name  |   |   |
|                    |  |  |  |  |   |   |
| Uni                | ted States B   | ankruptcy Court for the:                       | WESTERN DISTRICT C                         | F VIRGINIA   |   |   |
|                    | se number<br>nown)   |  |  |  | _   | Check if this is an mended filing                     |
|                    |  | orm 107<br>t of Financial                      | Affairs for Indivi                         | duals Filing for I   | Bankruptcy  | 4/16  |
| info<br>nun        | rmation. If the novel in the results | more space is needed,<br>vn). Answer every que | attach a separate sheet to stion.          | this form. On the top of a   | e equally responsible for sup<br>ny additional pages, write you   |   |
| Par                |  |  | rital Status and Where Yo                  | u Lived Before   |   |   |
| 1.                 | What is yo   | ur current marital statu                       | is?  |  |   |   |
|                    | ■ Marrie □ Not ma  | -  |  |  |   |   |
| 2.                 | During the   | last 3 years, have you                         | lived anywhere other than                  | where you live now?  |   |   |
|                    | ■ No □ Yes. L  | ist all of the places you I                    | ived in the last 3 years. Do r             | not include where you live no  | w.  |   |
|                    | Debtor 1 F   | Prior Address:                                 | Dates Debtor 1 lived there                 | Debtor 2 Prior A   | ddress:   | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state |  |  |  |  | nity property state or territory<br>Rico, Texas, Washington and W |   |
|                    | ■ No   |  |  |  |   |   |
|                    | ☐ Yes. M   | lake sure you fill out <i>Sch</i>              | nedule H: Your Codebtors (C                | Official Form 106H).   |   |   |
| Pai                | rt 2 Expla   | ain the Sources of You                         | r Income                                   |  |   |   |
| 4.                 | Fill in the to   | tal amount of income yo                        | u received from all jobs and               | ng a business during this y<br>all businesses, including par<br>ve together, list it only once u |   | ndar years?   |
|                    | □ No   |  |  |  |   |   |
|                    | Yes. F   | ill in the details.                            |  |  |   |   |
|                    |  |  | Debtor 1                                   |  | Debtor 2  |   |
|                    |  |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.                        | Gross income<br>(before deductions<br>and exclusions) |
|                    | r last calend<br>nuary 1 to D  | ar year:<br>December 31, 2016 )                | ☐ Wages, commissions, bonuses, tips        | \$65,200.00  | ☐ Wages, commissions, bonuses, tips                               | \$0.00  |
|                    |  |  | Operating a business                       |  | ☐ Operating a business  |   |

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Debtor 2 Denise F. Jackson Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) \$9,330.00 \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$0.00 \$50,265.00 □ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$107,329.00 \$0.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$0.00 \$22,675.10 □ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$80,870.00 \$0.00 □ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year: \$102,465.00 \$0.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$21,027.50 \$0.00 □ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$0.00 □ Wages, commissions, \$86,382.00 ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. п No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: \$0.00 Annuity from Sanlam \$295.00 (January 1 to December 31, 2016)

Debtor 1

lan R. Jackson

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|    |  | an R. Jacks<br>Denise F. Ja                  |  | Case number (if known)   |  |   |   |  |  |
|----|--|--|--|--|--|---|---|--|--|
|    |  |  |  |  |  |   |   |  |  |
|    |  |  |  | Debtor 1 Sources of income Describe below.   | Gross income from each source (before deductions and exclusions)   | Debtor 2<br>Sources of inco<br>Describe below.  | ome                                       | Gross income<br>(before deductions<br>and exclusions)  |  |
|    |  |  |  | Rental of an office building   | \$8,000.00   |   |   |  |  |
|    |  |  |  | Social Security  | \$7,365.00   |   |   |  |  |
|    |  | ndar year be<br>o December                   |  |  | \$0.00   | Annuity from  | Sanlam                                    | \$385.00   |  |
|    |  |  |  | Rental of an office building   | \$3,000.00   |   |   |  |  |
|    |  |  |  | Social Security  | \$1,794.00   |   |   |  |  |
|    |  | ndar year:<br>o December                     | 31, 2014)  |  | \$0.00   | Annuity from  | Sanlam                                    | \$385.00   |  |
|    | □ Yes  | No. Yes  * Subject                           | Go to line List below paid that co not include to adjustment or Debtor 2 e 90 days before Go to line List below include pa | 7. each creditor to whom you p reditor. Do not include payme payments to an attorney for nt on 4/01/19 and every 3 year or both have primarily constore you filed for bankruptcy, 7. each creditor to whom you p | ars after that for cases filed or  | in one or more paying gations, such as chill or after the date of all of \$600 or more? | ments and t<br>ld support a<br>adjustment | and alimony. Alsó, do<br>t.<br>t creditor. Do not      |  |
|    | Credito                                      | or's Name an                                 | d Address  | Dates of paym  | nent Total amount paid   | Amount you still owe  | Was this                                  | payment for  |  |
| 7. | Insiders<br>of which<br>a busine<br>alimony. | include your<br>you are an o<br>ss you opera | relatives; any<br>fficer, directo  | y general partners; relatives or, person in control, or owner  | e a payment on a debt you of<br>fany general partners; partner<br>of 20% or more of their votin<br>include payments for domestic | erships of which you<br>g securities; and an  | ı are a gene<br>y managing                | eral partner; corporations<br>agent, including one for |  |
|    | ■ No   | Liotellas                                    | manta ta ar  | noidor   |  |   |   |  |  |
|    |  | s. List all payr                             |  | Dates of payn  | nent Total amount  | Amount you still owe  | Reason fo                                 | or this payment  |  |

Official Form 107

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson   |   | Case number (if known)   |   |  |  |  |  |  |  |
|--|---|--|---|--|--|--|--|--|--|
| insider?   | thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an sider? clude payments on debts guaranteed or cosigned by an insider. |  |   |  |  |  |  |  |  |
| ■ No □ Yes. List all payments to an insider  |   |  |   |  |  |  |  |  |  |
| Insider's Name and Address   | Dates of payment  | Total amount Amount you paid still owe   | Reason for this payment Include creditor's name                     |  |  |  |  |  |  |
| Part 4: Identify Legal Actions, Repossession   | ons, and Foreclosures   |  |   |  |  |  |  |  |  |
| <ul> <li>Within 1 year before you filed for bankrup<br/>List all such matters, including personal injur<br/>modifications, and contract disputes.</li> </ul> |   |  |   |  |  |  |  |  |  |
| <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>   |   |  |   |  |  |  |  |  |  |
| Case title Case number   | Nature of the case  | Court or agency  | Status of the case  |  |  |  |  |  |  |
| A & M Supply Corp VS I & J Home<br>Builders<br>206-0012096   | Kitchen cabinets<br>\$43420.87  | Fairfax County Circuit<br>Court<br>4110 Chain Bridge Rd<br>Fairfax, VA 22030                 | ■ Pending □ On appeal □ Concluded                                   |  |  |  |  |  |  |
| ABC Supply Co. Inc. v. Ian R. Jackson & Denise F. Jackson  | Civil   | Fluvanna Circuit Court   | ■ Pending □ On appeal □ Concluded                                   |  |  |  |  |  |  |
| Allied Concrete VA I & J Home<br>Builders / Ian Jackson registered<br>Agent<br>540GV16003670-00  | Supplies for<br>\$5608.84   | Charlottesville Gen District<br>Court<br>606 East Market Street<br>Charlottesville, VA 22903 | ■ Pending □ On appeal □ Concluded                                   |  |  |  |  |  |  |
| Builders 1st Source v. lan R.<br>Jackson & Denise F. Jackson   | Civil   | Albemarle Circuit Court  | ■ Pending □ On appeal □ Concluded □ Pending ■ On appeal □ Concluded |  |  |  |  |  |  |
| Certified Environmental Drilling v. lan R. Jackson & Denise F. Jackson   | Civil   |  |   |  |  |  |  |  |  |
| Container Rentals VS Ian Jackson for I & J Home Builders   | Dumpsters<br>supplied<br>\$19055.55   | Fluvanna Gen District Court<br>72 Main Street<br>Palmyra, VA 22963                           | <ul><li>□ Pending</li><li>■ On appeal</li><li>□ Concluded</li></ul> |  |  |  |  |  |  |
|  |   |  | Court date 9/27/16  |  |  |  |  |  |  |
| Commonwealth Building Materials VS I&J Homebuilders/lanJackson registered agent GV16018349-00  | Claim for \$9230.39   | Albemarle County Circuit<br>Court<br>Charlottesville, VA 22902                               | ■ Pending □ On appeal □ Concluded                                   |  |  |  |  |  |  |
|  |   |  | Court date October 20 2016  |  |  |  |  |  |  |

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lan R. Jackson Debtor 1 Debtor 2 Denise F. Jackson Case number (if known) Case title Nature of the case Court or agency Status of the case Case number Denise Stancil VS I & J Home Client injured on Fluvanna County Circuit Pending Builders and registered agent lan R property under Court ☐ On appeal Jackson construction P O Box 550 ☐ Concluded 16000163-00 claiming Palmyra, VA 22963 \$2,000.000 Claim # from Erie Insurance 010420211753 Foster Fuels vs lan Jackson c/o I & **Fuel Supplies Campbell County Gen** Pending \$8949.11 J Home Builders **District Court** □ On appeal GV 161626 732 Village Highway ☐ Concluded Rustburg, VA 24588 Ferguson Enterprises v. lan R. Civil Lynchburg GDC Pending Jackson & Denise F. Jackson ☐ On appeal □ Concluded Noland Company v. lan R. Jackson Civil **Charlottesville General Dist** Pending & Denise F. Jackson Ct ☐ On appeal P.O. Box 2677 ☐ Concluded Charlottesville, VA 22902 Sherwin Williams v. Ian R. Jackson **Richmond Pcu** Civil Pending & Denise F. Jackson 1601 Ownby Ln ☐ On appeal Richmond, VA 23220 ☐ Concluded Van Der Linde Recycling v. Ian R. Fluvanna Circuit Court Civil □ Pending Jackson & Denise F. Jackson On appeal ☐ Concluded Wilson Ready Mix, LLC v. lan R. Civil **Augusta GDC** Pending Jackson & Denise F. Jackson ☐ On appeal ☐ Concluded American Express v. Denise F. Civil **Albemarle Circuit Court** Pending Jackson ☐ On appeal 3CL17-63 ☐ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

| Creditor Name and Address                                      | Describe the Property  Explain what happened          | Date       | Value of the property |
|--|---|------------|-----------------------|
| Peter Sorensen<br>1143 Campbell Hill Lane<br>Keswick, VA 22947 | House under construction  ☐ Property was repossessed. | 09/23/2016 | \$240,000.00          |
| Reswick, VA 22547  | ☐ Property was foreclosed. ☐ Property was garnished.  |            |                       |
|  | ☐ Property was attached, seized or levied.            |            |                       |

Case 17-60265 Doc 1 Filed 02/13/17 Entered 02/13/17 09:06:54 Page 87 of 117 Document Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☐ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Tithing to the church paid weekly over 2015-2016 \$11,195.00 City Church 101 Rio road east the last two years Charlottesville, VA 22901 Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Date payment Person Who Was Paid Description and value of any property Amount of **Address** transferred or transfer was payment **Email or website address** made

Person Who Made the Payment, if Not You

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| Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson  |   | Case number (if kno                      | wn)                                 |                        |
|---|---|--|-------------------------------------|------------------------|
| Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   | Description and value of any prop transferred   | or                                       | ate payment<br>transfer was<br>ade  | Amount o<br>paymen     |
| Slayton Law, PLC<br>913 East Jefferson Street<br>Charlottesville, VA 22902<br>marshall@marshallslayton.com  | Attorney Fees   | \$2<br>10                                | 16/16 -<br>2000<br>0/7/16 -<br>2000 | \$4,000.00             |
| DECAF<br>112 Goliad St<br>Benbrook, TX 76126-2009   | ccc   | 9/                                       | 21/17                               | \$25.00                |
| <ul> <li>Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>  | ors or to make payments to your creditor  |  | nsfer any prope                     | erty to anyone who     |
| Person Who Was Paid Address   | Description and value of any prop transferred   | or                                       | ate payment<br>transfer was<br>ade  | Amount o paymen        |
| <ul> <li>Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No</li> <li>Yes. Fill in the details.</li> </ul>  | usiness or financial affairs?<br>ade as security (such as the granting of a s                     | ecurity interest or                      | mortgage on you                     | r property). Do not    |
| Person Who Received Transfer Address  Person's relationship to you  | Description and value of<br>property transferred  | payments reception paid in exchar        | eived or debts                      | Date transfer was made |
| Chet N. Seapy and JoAnn H. Seapy<br>2272 Oakridge Court<br>Charlottesville, VA 22911  | 2272 Oakridge Court   | \$544,420.00<br>No cash to s<br>HUD1.    |                                     | 1/19/17                |
| Miguel D. Brock<br>130 Rock Rd.<br>New Canton, VA 23123   | 340 Windsor Place,<br>Buckingham, VA 23921  | Sale price \$1<br>cash to selle<br>HUD1. |                                     |                        |
| Lot 47 and Lot 48 Champion Pointe<br>LLC  | 50% ownership interest in LLC sold to other 50% owner, Todd Barrd, for initial investment amount. | \$21,000                                 |                                     | ???                    |
| <ul> <li>Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pressure in the property of the property</li></ul> |   | elf-settled trust o                      | r similar device                    | of which you are a     |
| ☐ Yes. Fill in the details.  Name of trust  | Description and value of the prope  | erty transferred                         |                                     | Date Transfer was      |
|   |   |  |                                     | made                   |

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Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ☐ No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) **United Bank Empty** ■ No 1265 Seminole Trail ☐ Yes Charlottesville, VA 22901 **Suntrust Bank** \$18,000.00 **Debtors** □ No Datona Beach, FL Yes 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☐ No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Household goods and **Storage Container Debtors amd Timmy** □ No **Rhodes School Lane Beach** furnishings listed on Yes Palmyra, VA Schedule B, lines 6-9. Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Jake Jackoson Safe Deposit Box \$12,500 - proceeds from sale \$12,500.00 **SunTrust Bank** of land owned by son in

**Tudor Place Subdivision.** 

Daytona Beach, FL

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Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson

Case number (if known)

| Part 10: | <b>Give Details</b> | <b>About</b> | <b>Environmental</b> | Information |
|----------|---------------------|--------------|----------------------|-------------|
|----------|---------------------|--------------|----------------------|-------------|

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

|     | •  |  |                  |  |                    |  |  |  |  |
|-----|--|--|------------------|--|--------------------|--|--|--|--|
| Rep | ort all notices, releases, and proceedings tha   | at you know about, regardless of when                                      | they occurred    | I.   |                    |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? |  |                  |  |                    |  |  |  |  |
|     | ■ No   |  |                  |  |                    |  |  |  |  |
|     | Yes. Fill in the details.  |  |                  |  |                    |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) |                  | ental law, if you  | Date of notice     |  |  |  |  |
| 25. | Have you notified any governmental unit of   | any release of hazardous material?   |                  |  |                    |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                  |  |                    |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) |                  | ental law, if you  | Date of notice     |  |  |  |  |
| 26. | Have you been a party in any judicial or adn   | ninistrative proceeding under any envir                                    | onmental law     | ? Include settlements a  | and orders.        |  |  |  |  |
|     | ■ No   |  |                  |  |                    |  |  |  |  |
|     | ☐ Yes. Fill in the details.  |  |                  |  |                    |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the    | case   | Status of the case |  |  |  |  |
| Par | t11: Give Details About Your Business or   | Connections to Any Business  |                  |  |                    |  |  |  |  |
| 27. | Within 4 years before you filed for bankrupt   | cy, did you own a business or have an                                      | of the follow    | ing connections to any   | / business?        |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in  | n a trade, profession, or other activity,                                  | either full-time | or part-time   |                    |  |  |  |  |
|     | ■ A member of a limited liability comp   | any (LLC) or limited liability partnershi                                  | p (LLP)          |  |                    |  |  |  |  |
|     | ☐ A partner in a partnership   |  |                  |  |                    |  |  |  |  |
|     | ■ An officer, director, or managing exc  | ecutive of a corporation   |                  |  |                    |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting  | g or equity securities of a corporation                                    |                  |  |                    |  |  |  |  |
|     | ☐ No. None of the above applies. Go to F   | Part 12.   |                  |  |                    |  |  |  |  |
|     | ■ Yes. Check all that apply above and fill   | in the details below for each business                                     |                  |  |                    |  |  |  |  |
|     | Business Name  | Describe the nature of the business  |                  | r Identification numbe   |                    |  |  |  |  |
|     | Address<br>(Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   |                  | Do not include Social Security number or ITIN.  Dates business existed |                    |  |  |  |  |
|     | I & J HOME BUILDERS  | Construction   | EIN:             | 541922777  |                    |  |  |  |  |
|     | 21708 James Madison Hwy<br>Troy, VA 22974  | Denise Jackson bookkeeper Jeff   | From-To          | 1999-2016  |                    |  |  |  |  |

**Dalton CPA** 

Case 17-60265 Doc 1 Filed 02/13/17 Entered 02/13/17 09:06:54 Page 91 of 117 Document Debtor 1 lan R. Jackson Debtor 2 Denise F. Jackson Case number (if known) Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed **I&J Property Holdings** administrates I&J Homebuilders EIN: 542035538 21708 James Madison Hwy Denise Jackson Bookkeeper Jeff From-To Troy, VA 22974 2001-2016 **Dalton CPA** EIN: Route 15 Fluvanna 11B LLC **Property company leasing** 460465161 21708 James Madison Hwy From-To 11/7/2001-08/01/2016 Troy, VA 22974 Denise Jackson bookkeeper Jeff **Dalton CPA** EIN: Front Gate Holdings, Inc. Realty company 542035615 21708 James Madison Hwy Denise Jackson Bookkeeper Jeff From-To 03/09/2001 Troy, VA 22974 **Dalton CPA** Lot 47 and 48 Champion Pointe Property company EIN: LLC Denise Jackson bookkeeper Jeff From-To 06/16/2016 21708 James Madison Hwy Troy, VA 22974 **Dalton CPA** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) **Union Bank** 06/14/2016 **PO BOX 940** Ruther Glen, VA 22546 **United Bank** 04/22/2016 1265 Seminole Trail Charlottesville, VA 22901 Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ lan R. Jackson /s/ Denise F. Jackson lan R. Jackson Denise F. Jackson Signature of Debtor 1 Signature of Debtor 2 Date February 13, 2017 **Date** February 13, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1   |  |   |  |  |
|--|--|---|--|--|
|  | lan R. Jackson   |   |  |  |
| Debtor 2   | First Name  Denise F. Jackson  | Middle Name   | Last Name  |  |
| (Spouse if, filing)  | First Name   | Middle Name   | Last Name  | —  |
| United States Ba   | inkruptcy Court for the:   | WESTERN DISTR   | RICT OF VIRGINIA   |  |
| Case number  |  |   |  |  |
| (if known)   |  |   |  | ☐ Check if this is an amended filing   |
| Official Fo  |  | n for Indiv   | ∕iduals Filing Under Ch  | napter 7 12/15   |
| ■ creditors hav ■ you have leas You must file thi whiche on the  If two married po   | ever is earlier, unless the<br>form<br>eople are filing together<br>and date the form.   | ur property, or<br>nd the lease has no<br>ithin 30 days after<br>e court extends the<br>in a joint case, bo | not expired.  you file your bankruptcy petition or by the le time for cause. You must also send cop  oth are equally responsible for supplying o   | ies to the creditors and lessors you list  |
| write y  | our name and case nun  | nber (if known).  |  |  |
| write y Part 1: List Y   | our name and case nun  | ber (if known).   |  |  |
| Part 1: List Y   | our name and case nun<br>our Creditors Who Have<br>ors that you listed in Pa   | ber (if known).   | D: Creditors Who Have Claims Secured by  |  |
| Part 1: List Y  1. For any credit information be   | our name and case nun<br>our Creditors Who Have<br>ors that you listed in Pa   | nber (if known).  Secured Claims  ort 1 of Schedule D   |  | Property (Official Form 106D), fill in the   |
| Part 1: List Y  1. For any credit information be identify the cr   | our name and case nun<br>our Creditors Who Have<br>ors that you listed in Pa<br>elow.  | nber (if known).  Secured Claims  ort 1 of Schedule D   | O: Creditors Who Have Claims Secured by What do you intend to do with the prop secures a debt?   | Property (Official Form 106D), fill in the perty that Did you claim the property                           |
| Part 1: List Y.  1. For any credit information be Identify the cr  Creditor's Aname:                                       | our name and case nun<br>our Creditors Who Have<br>ors that you listed in Pa<br>elow.<br>editor and the property th  | nber (if known).  Secured Claims  ort 1 of Schedule D  nat is collateral                                    | O: Creditors Who Have Claims Secured by What do you intend to do with the propsecures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a   | Property (Official Form 106D), fill in the perty that  Did you claim the property as exempt on Schedule C? |
| Part 1: List Y.  1. For any credit information be Identify the cr  Creditor's Aname:                                       | our name and case number our Creditors Who Have ors that you listed in Palow. editor and the property the last Bank  2013 Chevrolet Volumiles  | nber (if known).  Secured Claims  ort 1 of Schedule D  nat is collateral                                    | O: Creditors Who Have Claims Secured by What do you intend to do with the propsecures a debt?  Surrender the property. Retain the property and redeem it.  | Property (Official Form 106D), fill in the perty that  Did you claim the property as exempt on Schedule C? |
| Part 1: List Y  1. For any credit information be Identify the cr  Creditor's Aname:  Description of                        | our name and case number our Creditors Who Have ors that you listed in Palelow.  editor and the property the light of the property the light of the property of the light of the property of the light of the property of the light of the ligh | t 103258 4.00 cridge Court,   | D: Creditors Who Have Claims Secured by What do you intend to do with the propsecures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.  | Property (Official Form 106D), fill in the perty that  Did you claim the property as exempt on Schedule C? |
| Part 1: List Y  1. For any credit information be Identify the cr  Creditor's name:  Description of property securing debt: | our name and case number our Creditors Who Have ors that you listed in Pallow.  editor and the property the state of the property the state of the property the state of the property of of the pro | t 103258 4.00 cridge Court,   | D: Creditors Who Have Claims Secured by What do you intend to do with the propsecures a debt?  □ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: | Property (Official Form 106D), fill in the perty that  Did you claim the property as exempt on Schedule C? |

Official Form 108

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| Debtor 1 Debtor 2 lan R. Jackson Denise F. Jackson |  | Case number (if known)  |       |  |
|--|--|---|-------|--|
|  |  |   |       |  |
| Creditor's Na                                      | ationstar Mortgage   | <ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>  | □ No  |  |
| Description of property securing debt:             | 19 Starboard Drive Bracey, VA<br>23919 Mecklenburg County<br>Rental: House zoned residential<br>with commercial contingency<br>TAV = \$198,500<br>Debtors' value = \$220,000 | <ul> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>   | ■ Yes |  |
| Creditor's <b>U</b> i                              | nion Bank  | ☐ Surrender the property. ☐ Retain the property and redeem it.  | □ No  |  |
| Description of property securing debt:             | Route 15, LLC. Assets = Office<br>building and two sheds located<br>at 21708 James Madison Hwy,<br>Troy, VA 22974. Debtor  | <ul> <li>□ Retain the property and enter into a<br/>Reaffirmation Agreement.</li> <li>■ Retain the property and [explain]:</li> </ul>   | ■ Yes |  |
|  | value=\$550,000.00<br>100 % ownership  | Retain & make payments  | _     |  |
| Creditor's <b>U</b>                                | nion First Market Bank   | Surrender the property.   | □ No  |  |
| Description of property securing debt:             | 661 Cedar Meadows Drive, Nellysford, VA 22958 Nelson County Residence: Two story rental house TAV = \$327,600 Debtors' value = \$420,000                                     | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul> | ■ Yes |  |
| Creditor's <b>U</b>                                | nion First Market Bank   | ■ Surrender the property.   | □ No  |  |
| Description of property securing debt:             | 123 Walk Around Lane Roseland, VA 22967 Nelson County Residence: Two story house on a basement - rental property TAV = \$459,300 Debtors' value = \$550,000                  | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul> | ■ Yes |  |
| Creditor's <b>U</b>                                | nion First Market Bank   | <ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>  | □ No  |  |
| Description of property securing debt:             | 187 Windsor Place<br>Buckingham, VA 23921<br>Buckingham County<br>Ranch house - rental property  | Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:   | ■ Yes |  |

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| Debtor 1 Ian R. Jackson Debtor 2 Denise F. Jackson   | Case number (if known)   |            |  |
|--|--|------------|--|
| Creditor's Union First Market Bank name:  Description of property securing debt:  The security of Buckingham, VA 23921 Residence: Single story ranch rental property   | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:  Description of property securing debt:  Description of property Securing debt:  Description of property Securing debt:  Description of property Suckingham, VA 23921  Buckingham County Debtor value | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:  Description of Lot 197 Shenandoah Crossing property securing debt:   | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:  Description of property Louisa, VA securing debt:  | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:  Description of property Subdivivion securing debt:   | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:  Description of Lot 67-2-E Three Notch Road property securing debt:   | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | □ No ■ Yes |  |
| Creditor's Union First Market Bank name:   | ■ Surrender the property.  □ Retain the property and redeem it.  | □ No ■ Yes |  |

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|                     | . Jackson<br>se F. Jackson                                | Case number (if known)  |                            |
|---------------------|---|---|----------------------------|
|                     |   |   |                            |
| Description of      |   | ☐ Retain the property and enter into a  |                            |
| property            | Buckingham, VA  | Reaffirmation Agreement.  Retain the property and [explain]:  |                            |
| securing debt:      |   | - Retain the property and [explain].  | _                          |
|                     |   |   |                            |
| Creditor's U        | nited Bank  | ☐ Surrender the property.   | □ No                       |
| name:               |   | ☐ Retain the property and redeem it.  |                            |
| Description of      | 101 West Park Drive                                       | Retain the property and enter into a  | Yes                        |
| property            | Charlottesville, VA 22901                                 | Reaffirmation Agreement.  Retain the property and [explain]:  |                            |
| securing debt:      | Albemarle County  | - Retail the property and [explain].  |                            |
| J                   | Rental: Four apartments.  Debtors plan to live in one and |   |                            |
|                     | rent the other three. TAV =                               |   |                            |
|                     | \$507,400   | Datain 9 maka naumanta  |                            |
|                     | Debtors' value = \$380,000                                | Retain & make payments  | _                          |
| Creditor's US       | S Bank  |   | □ No                       |
| name:               | 3 Balik   | Surrender the property.   | □ No                       |
| name.               |   | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>           | Yes                        |
| Description of      |   | Reaffirmation Agreement.  |                            |
| property            | 23919 Mecklenburg County Rental: Single story ranch       | ☐ Retain the property and [explain]:  |                            |
| securing debt:      | TAV = \$ 156,100  |   |                            |
|                     |   |   |                            |
| For any unexpired   |   | d in Schedule G: Executory Contracts and Unexpire   |                            |
|                     |   | nexpired leases are leases that are still in effect; the<br>the trustee does not assume it. 11 U.S.C. § 365(p)( |                            |
| Describe your ur    | nexpired personal property leases                         |   | Will the lease be assumed? |
| Lessor's name:      | Angel Rivera  |   | □ Na                       |
| Lessor s riame.     | Angel Rivera  |   | □ No                       |
|                     |   |   | Yes                        |
| Description of los  | and Americant rented                                      |   |                            |
| Property:           | sed Apartment rented                                      |   |                            |
| Lessor's name:      | Carlos and Maria Umanzoa                                  |   | □ No                       |
|                     |   |   | _                          |
|                     |   |   | Yes                        |
| Description of leas | sed Apartment rented                                      |   |                            |
| Property:           |   |   |                            |
| Lessor's name:      | Cindy Merind  |   | No                         |
|                     |   |   | ☐ Yes                      |
| Description of leas | sed House rented  |   |                            |
| Property:           | House remou   |   |                            |
| Lessor's name:      | Vaughn Meadows  |   | □ No                       |
|                     |   |   |                            |

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|     | btor 1 lan R. Jac<br>btor 2 Denise F. |  | Case number (if known)  |
|-----|---------------------------------------|--|---|
|     |                                       |  |   |
|     |                                       |  | ■ Yes   |
|     | scription of leased operty:           | Apartment rented   |   |
| Les | ssor's name:                          | Verizon  | □ No  |
|     |                                       |  | ■ Yes   |
|     | scription of leased operty:           | Cell phone   |   |
| Pai | rt 3: Sign Below                      |  |   |
|     |                                       | ury, I declare that I have ir<br>ct to an unexpired lease. | cated my intention about any property of my estate that secures a debt and any personal |
| Χ   | /s/ lan R. Jacks                      | son  | X /s/ Denise F. Jackson   |
|     | lan R. Jackson<br>Signature of Debt   |  | Denise F. Jackson Signature of Debtor 2   |
|     | Date <b>Febru</b> a                   | ary 13, 2017   | Date February 13, 2017  |

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| Fill in this info  | rmation to identify your case:  |  |  | irected in this form and                                  | in Form                       |
|--|---|--|--|---|-------------------------------|
| Debtor 1   | lan R. Jackson  | 122  | 2A-1Supp:  |   |                               |
| Debtor 2<br>(Spouse, if filing)                          | Denise F. Jackson   | 1  | ■ 1. There is no presu                               | umption of abuse  |                               |
|  | Bankruptcy Court for the: Western District of   | Virginia [   | applies will be m                                    | o determine if a presum<br>nade under <i>Chapter 7 M</i>  | •                             |
| Case number  |   |  |  | cial Form 122A-2).  |                               |
| (if known)   |   |  |  | does not apply now bed service but it could app           |                               |
|  |   |  | ☐ Check if this is a                                 | n amended filing  |                               |
| Official F   | orm 122A - 1  |  |  | •   |                               |
| Chapter  | 7 Statement of Your Cur   | rent Monthly Inc   | ome  |   | 12/15                         |
| attach a separat<br>case number (if<br>qualifying milita | and accurate as possible. If two married people at<br>the sheet to this form. Include the line number to we<br>known). If you believe that you are exempted from<br>try service, complete and file Statement of Exempte<br>alculate Your Current Monthly Income | nich the additional information and a presumption of abuse because         | ipplies. On the top of ar<br>se you do not have prin | ny additional pages, write<br>narily consumer debts or    | your name and because of      |
| 1. What is   | your marital and filing status? Check one on  | y.   |  |   |                               |
| ☐ Not m  | narried. Fill out Column A, lines 2-11.   |  |  |   |                               |
| ☐ Marri  | ed and your spouse is filing with you. Fill ou  | t both Columns A and B, lines  | 2-11.  |   |                               |
| ☐ Marri  | ed and your spouse is NOT filing with you. \  | ou and your spouse are:  |  |   |                               |
| Liv  | ing in the same household and are not legal   | ly separated. Fill out both Col  | lumns A and B, lines 2                               | 2-11.   |                               |
| ре   | ing separately or are legally separated. Fill on<br>nalty of perjury that you and your spouse are le<br>ng apart for reasons that do not include evadin   | gally separated under nonban   | kruptcy law that applie                              | es or that you and your                                   |                               |
| 101(10A). Fo<br>the 6 months                             | erage monthly income that you received from all some example, if you are filing on September 15, the 6-md, add the income for all 6 months and divide the total the same rental property, put the income from that property                                     | onth period would be March 1 through 6. Fill in the result. Do not include | ugh August 31. If the amo<br>de any income amount mo | ount of your monthly income<br>ore than once. For example | e varied during<br>e, if both |
|  |   |  | Column A Debtor 1                                    | Column B Debtor 2 or non-filing spouse                    |                               |
|  | oss wages, salary, tips, bonuses, overtime, a eductions).   | and commissions (before all  | \$   | \$  |                               |
| •  | <b>and maintenance payments.</b> Do not include   B is filled in.   | payments from a spouse if  | \$   | \$  |                               |
| of you o<br>from an u<br>and room                        | unts from any source which are regularly paryour dependents, including child support.  unmarried partner, members of your household nmates. Include regular contributions from a spon on tinclude payments you listed on line 3.                                | Include regular contributions, your dependents, parents,                   | \$   | \$  |                               |
| <ol><li>Net inco</li></ol>                               | me from operating a business, profession, o   |  |  |   |                               |
| _  |   | Debtor 1   |  |   |                               |
|  | ceipts (before all deductions)  | <b>-\$</b>   |  |   |                               |
| -  | and necessary operating expenses thly income from a business, profession, or farm   | · — .  | \$   | \$  |                               |
|  | me from rental and other real property  | copy   | <u> </u>   | <b>*</b>  |                               |
| O. INCO  | me nominema and other real property   | Debtor 1   |  |   |                               |
| Gross re   | ceipts (before all deductions)  | \$   |  |   |                               |
|  | and necessary operating expenses  | <b>-</b> \$  |  |   |                               |
| -  | thly income from rental or other real property  | \$ Copy here ->  | \$   | \$  |                               |
|  | dividends, and royalties  |  | \$   | \$  |                               |
|  |   |  |  |   |                               |

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| tor 2 Denise F. Jackson  | Case number (if kno  |  |
|--|--|--|
|  | Column A Debtor 1  | Column B Debtor 2 or non-filing spouse |
| Unemployment compensation  | \$   | \$                                     |
| Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you  \$   | er   |  |
| For you \$ For your spouse \$  |  |  |
| <b>Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act.  | \$   | \$                                     |
| Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  | ٠  |  |
| •  | \$   |  |
| <del></del>  | \$   |  |
| Total amounts from separate pages, if any.   | + <b>*</b>   |  |
| . Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  |  | Total current month                    |
| t 2: Determine Whether the Means Test Applies to You   |  | income                                 |
| . Calculate your current monthly income for the year. Follow these steps:  |  |  |
| 12a. Copy your total current monthly income from line 11   | Copy line  | 11 here=> \$                           |
|  |  | Ψ                                      |
| Multiply by 12 (the number of months in a year)  |  | <b>x</b> 12                            |
| 12b. The result is your annual income for this part of the form  |  | 12b. \$                                |
|  |  | · ·                                    |
| . Calculate the median family income that applies to you. Follow these steps:  |  |  |
| Fill in the state in which you live.   |  |  |
| Fill in the number of people in your household.  |  |  |
| Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office.  | d in the separate ins  | 13. \$                                 |
|  |  |  |
| . How do the lines compare?  |  |  |
| . How do the lines compare?  14a.  | x 1, There is no pre   | sumption of abuse.                     |
| 14a.  Line 12b is less than or equal to line 13. On the top of page 1, check be  | •  | •                                      |
| <ul> <li>Line 12b is less than or equal to line 13. On the top of page 1, check be Go to Part 3.</li> <li>Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.</li> </ul>   | •  | •                                      |
| <ul> <li>Line 12b is less than or equal to line 13. On the top of page 1, check be Go to Part 3.</li> <li>Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.</li> </ul>   | resumption of abus   | e is determined by Form 122A-2.        |
| <ul> <li>14a.  Line 12b is less than or equal to line 13. On the top of page 1, check book Go to Part 3.</li> <li>14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The page 1 of the page 1 o</li></ul> | resumption of abus   | e is determined by Form 122A-2.        |
| 14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check be Go to Part 3.  14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.  13: Sign Below  By signing here, I declare under penalty of perjury that the information on this so X /s/ lan R. Jackson  X /s/ Der  | resumption of abus   | e is determined by Form 122A-2.        |
| 14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check bor Go to Part 3.  14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.  13: Sign Below  By signing here, I declare under penalty of perjury that the information on this significant to the property of perjury that the information on this significant to the property of perjury that the information on this significant to the property of perjury that the information on this significant to the property of perjury that the information on this significant to the property of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.  13: Sign Below  By signing here, I declare under penalty of perjury that the information on this significant to the property of page 1, check box 2, <i>The p</i> Go to Part 3 and fill out Form 122A-2.  | resumption of abus<br>statement and in any                                   | e is determined by Form 122A-2.        |
| Go to Part 3.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page of the page 1, check box 2, The page 1.  Sign Below  By signing here, I declare under penalty of perjury that the information on this signature.  X /s/ Der Denise Signature of Debtor 1  Date February 13, 2017  Date February 13, 2017  | ntatement and in any nise F. Jackson F. Jackson are of Debtor 2 ary 13, 2017 | e is determined by Form 122A-2.        |
| 14a.  Line 12b is less than or equal to line 13. On the top of page 1, check bogon to Part 3.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The page 1 to the           | ntatement and in any<br>nise F. Jackson<br>e F. Jackson<br>are of Debtor 2   | e is determined by Form 122A-2.        |

lan R. Jackson

Debtor 1

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| Fill ir           | n this inf                         | orma                    | ation to identify your case:   |  |
|-------------------|------------------------------------|-------------------------|--|--|
| Debto             | or 1                               | lar                     | n R. Jackson   |  |
| Debto             | or 2<br>use, if filir              | _                       | enise F. Jackson   |  |
| Unite             | d States                           | Bank                    | ruptcy Court for the: Western District of Virginia   |  |
|                   |                                    |                         |  | ☐ Check if this is an amended filing   |
| (if kn            | number<br>own)                     |                         |  |  |
|                   |                                    |                         |  |  |
| ⊃ffi              | cial F                             | orr                     | n 122A - 1Supp   |  |
|                   |                                    |                         | of Exemption from Presumption of A   | huse Under & 707(h)(2)   |
| Sia               | teme                               | 111                     | of Exemption from Fresumption of A   | Abuse Under § 707(b)(2) 12/15  |
| exem<br>exclusive | pted from<br>sions in<br>red by 11 | n a p<br>this s<br>U.S. | nt together with Chapter 7 Statement of Your Current Monthly In resumption of abuse. Be as complete and accurate as possible statement applies to only one of you, the other person should c. C. § 707(b)(2)(C). | . If two married people are filing together, and any of the  |
| Part              | 1 Id                               | entify                  | y the Kind of Debts You Have   |  |
|                   | personal,                          | fami                    | ts primarily consumer debts? Consumer debts are defined in 11 U<br>ly, or household purpose." Make sure that your answer is consistent<br>ing for Bankruptcy (Official Form 1).                                  |  |
|                   |                                    |                         | Form 122A-1; on the top of page 1 of that form, check box 1, <i>There</i>  | is no presumption of abuse, and sign Part 3. Then submit this  |
|                   |                                    |                         | ement with the signed Form 122A-1.   |  |
|                   | ☐ Yes.                             | JO 10                   | Part 2.  |  |
| Part :            | 2: De                              | eterm                   | nine Whether Military Service Provisions Apply to You  |  |
| 2                 |                                    |                         | abled veteran (as defined in 38 U.S.C. § 3741(1))?   |  |
|                   | □ No.                              |                         |  |  |
|                   | _                                  |                         | ou incur debts mostly while you were on active duty or while you were  | re performing a homeland defense activity?   |
|                   |                                    | -                       | S.C. § 101(d)(1); 32 U.S.C. § 901(1).  | o periorning a nomerana aciense activity.  |
|                   |                                    |                         | Go to line 3.  |  |
|                   |                                    | es.                     | Go to Form 122A-1: on the top of page 1 of that form, check box 1, submit this supplement with the signed Form 122A-1.   | There is no presumption of abuse, and sign Part 3. Then  |
| 3.                | Are vou                            | or ha                   | ve you been a Reservist or member of the National Guard?   |  |
|                   | □ No.                              |                         | pplete Form 122A-1. Do not submit this supplement.   |  |
|                   | ☐ Yes.                             |                         | e you called to active duty or did you perform a homeland defense a  | ctivity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  |
|                   |                                    |                         | Complete Form 122A-1. Do not submit this supplement.   | , ,  |
|                   |                                    |                         | Check any one of the following categories that applies:  |  |
|                   |                                    |                         | I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.  | The Means Test does not apply now, and sign Part 3. Then   |
|                   |                                    |                         | I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on,   | during the exclusion period. The exclusion period means  |
|                   |                                    |                         | which is fewer than 540 days before I file this bankruptcy case.  I am performing a homeland defense activity for at least 90 day  | the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii). |
|                   |                                    |                         | I performed a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before   | If your exclusion period ends before your case is closed,  |
|                   |                                    |                         | file this bankruptcy case.   | you may have to file an amended form later.  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-60265 Doc 1 Filed 02/13/17 Entered 02/13/17 09:06:54 Desc Main Document Page 104 of 117

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Western District of Virginia

| In  | re       | Ian R. Jackson<br>Denise F. Jackson  |                                     | Case N                       | 0.                  |                             |
|-----|----------|--|-------------------------------------|------------------------------|---------------------|-----------------------------|
|     | -        | Domoc I : Guoncom  | Debtor(s)                           | Chapte                       |                     |                             |
|     |          | DISCLOSURE OF COMPENSA   | ATION OF ATTO                       | RNEY FOR                     | DEBTOR(S)           |                             |
| 1.  | con      | suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I apensation paid to me within one year before the filing of endered on behalf of the debtor(s) in contemplation of or                                   | the petition in bankruptc           | y, or agreed to be p         | aid to me, for serv | nd that ices rendered or to |
|     |          | For legal services, I have agreed to accept  |                                     | \$                           | 4,000.00            | _                           |
|     |          | Prior to the filing of this statement I have received  |                                     | \$                           | 4,000.00            | _                           |
|     |          | Balance Due  |                                     | \$                           | 0.00                | _                           |
| 2.  | \$       | 335.00 of the filing fee has been paid.  |                                     |                              |                     |                             |
| 3.  | The      | source of the compensation paid to me was:   |                                     |                              |                     |                             |
|     |          | ■ Debtor □ Other (specify):  |                                     |                              |                     |                             |
| 4.  | The      | source of compensation to be paid to me is:  |                                     |                              |                     |                             |
|     |          | ■ Debtor □ Other (specify):  |                                     |                              |                     |                             |
| 5.  |          | I have not agreed to share the above-disclosed compensation  | tion with any other perso           | n unless they are m          | embers and associ   | ates of my law firm.        |
|     |          | I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of  |                                     |                              |                     | f my law firm. A            |
| 6.  | In       | return for the above-disclosed fee, I have agreed to render  | legal service for all aspe          | cts of the bankrupto         | y case, including:  |                             |
|     | b.<br>c. | Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemen Representation of the debtor at the meeting of creditors an [Other provisions as needed] | t of affairs and plan whi           | ch may be required;          | -                   | n bankruptcy;               |
|     | <b></b>  | Negotiations with secured creditors to reduce reaffirmation agreements and applications a 522(f)(2)(A) for avoidance of liens on housely   | s needed; preparation               |                              |                     |                             |
| 7.  | Ву       | agreement with the debtor(s), the above-disclosed fee doe<br>Representation of the debtors in any discha<br>any other adversary proceeding.  |                                     |                              | nces, relief fror   | n stay actions or           |
|     |          | Cl   | ERTIFICATION                        |                              |                     |                             |
| thi |          | rtify that the foregoing is a complete statement of any agrecuptcy proceeding.   | eement or arrangement f             | or payment to me for         | or representation o | of the debtor(s) in         |
|     | Feb      | ruary 13, 2017   | /s/ Marshall M. S                   | Slayton                      |                     |                             |
|     | Date     |  | Marshall M. Sla                     | yton VSB#37362               |                     |                             |
|     |          |  | Signature of Attorn Slayton Law, Pl |                              |                     |                             |
|     |          |  | 913 East Jeffers                    | son Street                   |                     |                             |
|     |          |  | Charlottesville,                    | VA 22902<br>Fax: (434) 293-5 | 017                 |                             |
|     |          |  |                                     | hallslayton.com              | y i <i>i</i>        |                             |
|     |          |  |                                     |                              |                     |                             |

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#### United States Bankruptcy Court Western District of Virginia

| In re  | Denise F. Jackson               | Case No.   |  |  |  |  |
|--------|---------------------------------|--|--|--|--|--|
|        |                                 | Debtor(s)  | Chapter 7                              |  |  |  |
|        | VERIFICATION OF CREDITOR MATRIX |  |  |  |  |  |
| The ab | ove-named Debtors hereby verify | that the attached list of creditors is true and co | orrect to the best of their knowledge. |  |  |  |
| Date:  | February 13, 2017               | /s/ lan R. Jackson                                 |  |  |  |  |
|        |                                 | Signature of Debtor                                |  |  |  |  |
| Date:  | February 13, 2017               | /s/ Denise F. Jackson                              |  |  |  |  |
|        |                                 | Denise F. Jackson                                  |  |  |  |  |

Signature of Debtor

lan R. Jackson

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Jackson, Ian and Denise -

A&M SUPPLY CORP. PO BOX 919393 ORLANDO, FL

ABC SUPPLY CO. INC. P O BOX 402117 ATLANTA, GA 30384-2117

ABC SUPPLY CORP. 160 EXPO RD. FISHERSVILLE, VA 22939

ALBEMARLE COUNTY
401 MCINTIRE ROAD ROOM 130
CHARLOTTESVILLE, VA 22902

ALBEMARLE COUNTY FIRE AND RESCUE 460 STAGECOACH RD SUITE F CHARLOTTESVILLE, VT 22902

ALLIED CONCRETE, INC. PO BOX 1647 CHARLOTTESVILLE, VA 22902

ALLIED PORTABLE TOILETS P O BOX 939 CROZET, VA 22932

ALLY BANK
P O BOX 380902
BLOOMINGTON, VA 55438-0902

AMERICAN EXPRESS P O BOX 1270 NEWARK, NJ 07101-1270

AMERICAN EXPRESS PO BOX 1270 NEWARK, NJ 07101-1270

AMERICAN EXPRESS PO BOX 297879 FORT LAUDERDALE, FL 33329-7879

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Jackson, Ian and Denise -

AMY JACKSON 794 PROSPECT AVE CHARLOTTESVILLE, VA 22903

ANGEL RIVERA 101D WEST PARK DRIVE CHARLOTTESVILLE, VA 22902

AQUA AIR 627 DICE STREET CHARLOTTESVILLE, VA 22903

ATEK ENVIRONMENTAL & SOIL TESTING 1488 HURON CT HARRISONBURG, VA 22801

ATLANTIC LAW GROUP, LLC PO BOX 2548
LEESBURG, VA 20177

AUGUSTA COOPERATIVE FARM BUREAU 1205B / RICHMOND ROAD STAUNTON, VA 24401

BAKER DISTRIBUTING COMPANY P O BOX 409635 ATLANTA, GA 30384

BANK OF AMERICA P O BOX 15019 WILMINGTON, DE 19886-5019

BANK OF AMERICA PO BOX 982236 EL PASO, TX 79998

BLOSSMAN P O BOX 750 GORDONSVILLE, VA 22942

BLUE RIDGE TERMITE AND PEST MANAGEMENT P O BOX 6549 CHARLOTTESVILLE, VA 22906

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Jackson, Ian and Denise -

BRETT BICKLEY 1641 MOUNTAIN LAUREL ROAD PALMYRA, VA 22963

BUCKINGHAM COUNTY TREASURER P.O. BOX 106
BUCKINGHAM, VA 23921

BUCKINGHAM SLATE CO P O BOX 8 ARVONIA, VA 23004

BUILDERS 1ST SOURCE FKA PRO-BUILD COMPANY 51 LAUREL HILL ROAD VERONA, VA 24482

CAMPBELL EQUIPMENT INC 16640 JAMES MADISON HWY PALMYRA, VA 22963

CAPITAL ONE
P O BOX 71083
CHARLOTTE, NC 28272-1083

CAPITAL ONE BANK, USA PO BOX 6492 CAROL STREAM, IL 60197-6492

CARL CORBIN PO BOX 6341 CHARLOTTESVILLE, VA 22906

CARLOS AND MARIA UMANZOA 101A WEST PARK DRIVE CHARLOTTESVILLE, VA 22902

CARPET EXRESS
915 MARKET STREET
DALTON, GA 30720

CAVALIER CONTAINERS
2316 HIGHLAND AVENUE
CHARLOTTESVILLE, VA 22903

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Jackson, Ian and Denise -

CENTRAL VIRGINIA ELECTRIC COOP PO BOX 2153 DEPT. 1340 BIRMINGHAM, AL 35287-1340

CENTRAL VIRGINIA RENTALS INC 2482 JEFFERSON HWY WAYNESBORO, VA 22980

CENTRAL WHOLESALE SUPPLY CORP P O BOX 7208 NORFOLK, VA 23509

CERTIFIED ENVIRONMENTAL DRILLING P O BOX 6538 CHARLOTTESVILLE, VA 22906

CHAMBERS LAND SURVEYING 253 WILLOW DR KESWICK, VA 22947

CHARLOTTESVILLE STONE COMPANY P O BOX 8425 ROANOKE, VA 22936

CINDY MERIND 5398 HIGHWAY NINE -O-THREE BRACEY, VA 23919

CITI
CREDIT MGMT DEPT.
PO BOX 6494
SIOUX FALLS, SD 57117-6494

CITI CARDS PO BOX 6062 SIOUX FALLS, SD 57117

CITIBANK
P O BOX 9001037
LOUISVILLE, KY 40290-1037

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Jackson, Ian and Denise -

CITY OF WAYNESBORO 503 W MAIN STREET STE 105 WAYNESBORO, VA 22980

COMCAST COMMUNICATIONS PO BOX 3006 SOUTHEASTERN, PA 19398

COMMONWEALTH BLDG MATERIALS, INC. C/O CAMERON/MCEVOY, PLLC 4100 MONUMENT CORNER DR., #420 FAIRFAX, VA 22030

COMMONWEALTH BLDG MATERIALS, INC. PO BOX 75747
BALTIMORE, MD 21275-5747

CONCRETE PIPES AND PRECAST, LLC 210 STONE SPRING ROAD HARRISONBURG, VA 22801

COUNTY OF FLUVANNA P O BOX 299 PALMYRA, VA 22963

COUNTY OF MECKLENBURG P O BOX 250 BOYDTON, VA 23917

DAVENPORT INSULATION 6471 S. VALLEY PIKE MT. CRAWFORD, VA 22841

ERIE INDEMNITY CO. C/O MARSDEN & SELEDEE, LLC 1 N. CHARLES ST, SUITE 2300 BALTIMORE, MD 21201-3740

ERIE INSURANCE CO. 100 ERIE INSURANCE PLACE ERIE, PA 16530-1104

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Jackson, Ian and Denise -

FEDERAL LOAN
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P O BOX 530210
ATLANTA, GA 30353-0210

FERGUSON ENTERPRISES 505 GARRETT STREET CHARLOTTESVILLE, VA 22902

FLUVANNA COUNTY P O BOX 299 PALMYRA, VA 22963

FOREST PRO INC. 8473 WEST RIVER RD SCOTTSVILLE, VA 24590

FOSTER FUELS, INC. PO BOX 190 BROOKNEAL, VA 24528

GOOCH ENGINEERING AND TESTING 1821 BROADWAY STREET CHARLOTTESVILLE, VA 22902

GREENE COUNTY TREASURER P.O. BOX 157 STANARDSVILLE, VA 22973-0157

HOME DEPOT P O BOX 790420 ST LOUIS, MO 63179

HOOVER PENROD PLC 342 S. MAIN ST. HARRISONBURG, VA 22801

HSBC 1 MORTGAGE WAY MOUNT LAUREL, NJ 08054

I & J HOMEBUILDERS, LLC 2272 OAKRIDGE COURT CHARLOTTESVILLE, VA 22911

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Jackson, Ian and Denise -

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JACKSON MANAGEMENT LLC

JAMIE A. MASTANDREA, PC 5200-B ROLLING ROAD BURKE, VA 22015

JEFF DALTON 520 GREENFIELD TERRACE CHARLOTTESVILLE, VA 22901

JIFFY LUBE P O BOX 620130 MIDDLETON, WI 53562

JOHN DEZIO 2350 COMMONWEALTH DRIVE CHARLOTTESVILLE, VA 22901

JOHNSON & JOHNSON PREFERRED FIN, INC P O BOX 26009 GREENSBORO, NC 27420

JONES AUTOMOTIVE P O BOX 910 TROY, VA 22974

KELVIN S. COVINGTON 773 RIVANNA WOODS DRIVE FORK UNION, VA 23055

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Jackson, Ian and Denise -

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LOUISA COUNTY TREASURER P.O. BOX 523 LOUISA, VA 23093

LOWE'S
P O BOX 530970
ATLANTA, GA 30353

LOWE'S PO BOX 1111 NORTH WILKESBORO, NC 28656

LOWE'S LAR P O BOX 530970 ATLANTA, GA 30353

LUCK STONE P O BOX 29871 RICHMOND, VA 23242

MATT GOOCH CONSULTING ENGINEER 707 OLIVER CREEK RD TROY, VA 22974

MAY SUPPLY 1775 ERICKSON AVE HARRISONBURG, VA 22801

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NELSON COUNTY TREASURER P.O. BOX 100 LOVINGSTON, VA 22949

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Jackson, Ian and Denise -

NOLAND COMPANY 307 RIDGE STREET CHARLOTESVILLE, VA 22902

NOLAND COMPANY C/O DERRICK E. ROSSER, P.C. 211-A ENGLAND ST. ASHLAND, VA 23005

P J NETWORKS 2340 COMMONWEALTH DRIVE CHARLOTTESVILLE, VA 22901

QUINN BEVERSLUIS 5544 THREE NOTCH RD LOUISA, VA 23093

REAL WOOD FLOORS 355 S. HIGHWAY 63 WEST PLAINS, MO 65775

ROCKYDALE QUARIES CORP. PO BOX 8425 ROANOKE, VA 24014

ROUTE 15, LLC PO BOX 5428 CHARLOTTESVILLE, VA 22905

SAM'S MASTERCARD P O BOX 960013 ORLANDO, FL 32896-0013

SCOTTY SIPE PO BOX 56 CRIMORA, VA 24431

SCOTTY SIPE DBA SIPE'S CONSTRUCTION PO BOX 56 CRIMORA, VA 24431

SHENANDOAH VALLEY WATER & COFFEE CO P O BOX 2339 STAUNTON, VA 24402

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Jackson, Ian and Denise -

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SKYLINE BRICK LLC 3900 SEMINOLE TRAIL CHARLOTTESVILLE, VA 22911

SOUTHERN FREIGHT LINES P O BOX 1691 COLUMBIA, SC 29202

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SUNOCO SUNTRAK
WEX BANK
P O BOX 4337
CAROL STREAM, IL 60197

SUNTRUST BANK AMERICAN EDUCATION SERVICES HARRISBURG, PA 17130-0001

TIME DISPOSAL P.O. BOX 7174 CHARLOTTESVILLE, VA 22906

TRITON STONE GROU 10471 WASHINGTON HWY GLEN ALLEN, VA 23059

U BANK 1005 790448 SAINT LOUIS, MO 63101

UNION 1658 STATE FARM BLVD. CHARLOTTESVILLE, VA 22911

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Jackson, Ian and Denise -

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UNION FIRST MARKET BANK P O BOX 940 RUTHER GLEN, VA 22546

UNION FIRST MARKET BANK PO BOX 940 RUTHER GLEN, VA 22546

UNITED BANK
P O BOX 11286
CHARLESTON, NC 25339-1286

US BANK P O BOX 21948 EAGAN, MN 55121

US BANK MORTGAGE PO BOX 790415 SAINT LOUIS, MO 63179-0415

VALLEY INSULATION INC 1345 NEW HOPE ROAD WAYNESBORO, VA 22980

VAN DER LINE RECYCLING 2820 HYDRAULIC ROAD SUITE 1 CHARLOTTESVILLE, VA 22901

VAUGHN MEADOWS 101B WEST PARK DRIVE CHARLOTTESVILLE, VA 22902

VERIZON
BANKRUPTCY DEPARTMENT
500 TECHNOLOGY DRIVE, #550
SAINT CHARLES, MO 63304-2225

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Jackson, Ian and Denise -

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WELLS FARGO P O BOX 70241 PHILADELPHIA, PA 19178

WILSON READ MIX P O BOX 1347 HARRISONBURG, VA 22803